

ORIGINAL

SCANNED

CLASS B
WATER AND/OR WASTEWATER UTILITIES

**FINANCIAL, RATE
AND ENGINEERING
MINIMUM FILING
REQUIREMENTS**

OF

Company: **Indiantown Company, Inc.**

Exact Legal Name of Utility

VOLUME IIIa



CMP _____
COM _____
CTR _____
ECR 1 _____
GCL _____
OPC _____
MMS _____
RCA _____
SCR _____
SEC 1 _____
OTH _____

FOR THE

Test Year Ended: December 31, 2003

DOCUMENT NUMBER-DATE

09015 AUG 18 03

FPSC-COMMISSION CLERK

INDIANTOWN COMPANY, INC.
Financial, Rate and Engineering Minimum Filing Requirements
Index

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<u>Number</u>	<u>Schedule</u>

IIIa	(A)	Copies of water and wastewater plant operating reports for the test year (2003).
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Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: JANUARY, 2003

DEP Form No.:	<u>62-699.310(3)</u>
Form Title:	<u>Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water</u>
Effective Date:	<u>December 19, 1994</u>
DEP Application No.:	<u>(Filled in by DEP)</u>

Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System
Name: Indiantown Water Company

PWS Identification No.: 4430667

• System Owner
Name: Indiantown Company Inc.

Telephone No.: 561-597-2121

Address: 15851 S.W. Farms Rd. /P.O. Box 397

City: Indiantown,

State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,760

• Total Population Served by System at End of Reporting Month: 5,280

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant
Name: Indiantown Water Company

Telephone No.: 561-597-2121

Address: 15851 SW. Farms Rd./P.O. Box 397

City: _____

State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: **4430667**

Treatment Plant Name: **Indiantown Water Company**

Reporting Month/Year: **JANUARY, 2003**

Form Title: **Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water**
Effective Date: **December 19, 1994**
DEP Application No.: _____
(Filled in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: **JANUARY, 2003**

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
1	18	568,000	2.1	0.4			
2	16	511,000	2.0	0.3			
3	15	523,000	2.0	0.2			
4	16	471,000	2.0	0.3			
5	16	531,000	1.0	0.3			
6	17	559,000	1.1	0.3			
7	19	551,000	2.6	0.2			
8	16	520,000	2.1	0.4			
9	6	528,000	1.4	0.3			
10	11	542,000	1.4	0.3			
11	18	544,000	2.0	0.4			
12	17	581,000	2.3	0.4			
13	19	620,000	2.5	0.6			
14	17	549,000	2.5	0.4			
15	18	571,000	2.6	0.4			
16	19	657,000	4.0	0.2	6	0.3	
17	21	587,000	2.1	0.4			
18	18	554,000	3.0	0.2			
19	16	552,000	3.4	0.2			
20	18	590,000	2.9	0.4			
21	18	583,000	2.8	0.4			
22	19	620,000	2.0	0.3			
23	19	596,000	2.8	0.6			
24	17	559,000	2.5	0.4			
25	17	548,000	3.5	0.6			
26	19	684,000	3.5	0.6			
27	22	699,000	3.5	0.4			
28	17	582,000	2.4	1.0			
29	20	600,000	2.6	0.2			

Monthly Operation Report for Public Water Systems that Use Ground Water
 and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 4430667
 Treatment Plant Name: Indiantown Water Company
 Reporting Month/Year: JANUARY, 2003

DEP Form No.: 62-555.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 19, 1994
 DEP Application No.: _____
 (Filled in by DEP: _____)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	19	617,000	2.6	0.8			
31	19	602,000	3.1	0.4			
Total	XXXXXXX	17,799,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	574,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	699,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

† If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: FEBRUARY, 2003

DEP Form No.: 62-555.210(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEP Application No.: (Filled in by DEP)

COPY

* Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

- System Name: Indiantown Water Company PWS Identification No.: 4430667
- System Owner Name: Indiantown Company Inc. Telephone No.: 561-597-2121
Address: 15851 S.W. Farms Rd. /P.O. Box 397
City: Indiantown, State: FL Zip Code: 34956
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- Number of Service Connections at End of Reporting Month: 1,760
- Total Population Served by System at End of Reporting Month: 7,280

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

- Treatment Plant Name: Indiantown Water Company Telephone No.: 561-597-2121
Address: 15851 SW. Farms Rd./P.O. Box 397
City: State: FL Zip Code: 34956
- Permitted Maximum Day Capacity of Plant: 1,296,000 gpd
- Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: FEBRUARY, 2003

Dep Form No.: 82-855.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 18, 1994
 DEP Application No.: _____
 (Filed in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: FEBRUARY, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) ¹	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
1	19	588,000	2.7	0.6			
2	19	618,000	1.6	0.4			
3	19	626,000	2.0	0.3			
4	20	616,000	2.3	1.5			
5	18	610,000	2.4	0.2	6	0.2	
6	15	549,000	1.8	0.6			
7	18	597,000	2.0	0.4			
8	17	586,000	2.4	0.7			
9	18	594,000	2.5	0.4			
10	20	660,000	2.5	0.5			
11	19	614,000	2.6	0.4			
12	20	628,000	4.0	0.8			
13	19	615,000	3.3	1.5			
14	18	699,000	4.0	1.0			
15	20	688,000	4.0	1.5			Hydrant Flushing
16	21	653,000	4.0	0.8			
17	19	589,000	2.6	1.4			
18	17	553,000	2.5	0.6			
19	21	581,000	2.3	1.4			
20	19	592,000	2.0	0.8			
21	16	530,000	2.7	1.3			
22	16	527,000	1.5	0.2			
23	18	570,000	1.7	0.4			
24	17	566,000	1.6	0.2			
25	19	581,000	2.6	0.4			
26	17	572,000	2.0	0.4			
27	18	601,000	2.4	0.5			
28	24	670,000	2.6	0.5			
29							

Operation Report for Public Water Systems that Use Ground Water
 and for Consecutive Public Water Systems that Treat Their Water
 System PWS Identification Number: 4430667
 Treatment Plant Name: Indiantown Water Company
 Reporting Month/Year: FEBRUARY, 2003

DEP Form No.: 62-555.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 19, 1994
 DEP Application No.: _____
 (Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
30							
31							
Total	XXXXXXX	16,873,000	XXXXXXXXXXXX	XXXXXXXXXXXX		XXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	602,000	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	699,000	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXX	XXXXXXX

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

**Monthly Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water**

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: MARCH, 2003

DEP Form No.: <u>62-699.310(3)</u>
Form Title: <u>Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water</u>
Effective Date: <u>December 19, 1994</u>
DEP Application No.: _____
(Filled in by DEP)

- Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System
Name: Indiantown Water Company PWS Identification No.: 4430667

• System Owner
Name: Indiantown Company Inc. Telephone No.: 561-597-2121
Address: 15851 S.W. Farms Rd. /P.O. Box 397
City: Indiantown, State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1782

• Total Population Served by System at End of Reporting Month: 5,346

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant
Name: Indiantown Water Company Telephone No.: 561-597-2121
Address: 15851 SW. Farms Rd./P.O. Box 397
City: _____ State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: MARCH, 2003

DEP Form No.: 62-555.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 19, 1994
 DEP Application No.: _____
 (Filled in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: MARCH, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	
1	19	662,000	2.3	0.4			
2	20	664,000	2.6	0.4			
3	20	647,000	3.0	0.7			
4	18	580,000	2.2	0.5			
5	18	593,000	2.1	0.6			
6	20	724,000	3.1	1.0			Hydrant Flushing
7	20	664,000	2.1	0.4			
8	18	602,000	2.0	0.6			
9	20	677,000	1.7	0.4			
10	20	672,000	1.5	0.3			
11	18	606,000	2.3	0.3			
12	18	609,000	1.6	0.6			
13	18	608,000	3.0	0.3	6	0.4	
14	18	571,000	2.0	0.7			
15	16	539,000	2.7	0.4			
16	18	594,000	2.3	0.8			
17	18	566,000	2.1	0.5			
18	15	521,000	1.6	0.6			
19	15	529,000	2.6	0.3			
20	16	564,000	2.2	0.7			
21	15	513,000	2.1	0.3			
22	17	514,000	2.7	0.7			
23	17	581,000	2.5	0.5			
24	18	565,000	3.4	0.6			
25	16	529,000	3.0	0.4			
26	17	537,000	2.1	0.7			
27	16	532,000	2.6	0.4			
28	20	477,000	3.0	0.6			
29	16	549,000	2.0	0.4			

Monthly Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: MARCH, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water
Systems that Use Ground Water and for
Consecutive Public Water Systems that
Treat Their Water
Effective Date: December 19, 1994
DEP Application No.:
(Filled In by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	18	582,000	2.2	0.4			
31	17	568,000	2.4	0.5			
Total	XXXXXX	18,139,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXX
Avg.	XXXXXX	585,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXX
Max.	XXXXXX	724,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXX

available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: APRIL, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEP Application No.: (Filled in by DEP)

- Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

- System Name: Indiantown Water Company PWS Identification No.: 4430667
- System Owner Name: Indiantown Company Inc. Telephone No.: 772-597-2121
- Address: 15851 S.W. Farms Rd. /P.O. Box 397
- City: Indiantown, State: FL Zip Code: 34956
- System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- Number of Service Connections at End of Reporting Month: 1,759
- Total Population Served by System at End of Reporting Month: 5,277

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

- Treatment Plant Name: Indiantown Water Company Telephone No.: 772-597-2121
- Address: 15851 SW. Farms Rd./P.O. Box 397
- City: State: FL Zip Code: 34956
- Permitted Maximum Day Capacity of Plant: 1,296,000 gpd
- Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-C
- Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

- Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

**Monthly Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water**

System PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: APRIL, 2003

DEP Form No.:	62-555.910(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	(Filled in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

- Reporting Month/Year: APRIL, 2003
- Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☐ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide
- Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
1	19	523,000	2.0	0.6			
2	15	541,000	2.6	0.3			
3	18	608,000	2.5	0.8			
4	18	586,000	2.7	0.4			
5	19	615,000	3.3	1.3			
6	19	632,000	3.5	0.8			
7	21	665,000	3.0	1.3			
8	20	651,000	2.7	1.0			
9	22	669,000	3.1	1.0			
10	18	590,000	3.7	0.9	6	0.6	
11	15	547,000	2.6	0.8			
12	20	637,000	2.4	0.8			
13	23	750,000	3.5	1.0			
14	24	737,000	3.1	0.6			
15	24	729,000	3.2	1.0			
16	20	693,000	2.7	0.4			
17	20	611,000	2.5	1.0			
18	21	673,000	2.7	0.6			
19	22	708,000	2.5	1.1			
20	20	694,000	2.5	0.6			
21	21	735,000	2.4	1.1			
22	22	710,000	3.8	0.7			
23	22	647,000	3.5	0.6			
24	21	548,000	2.2	0.4			
25	24	653,000	3.0	0.6			
26	17	549,000	2.2	0.3			
27	18	494,000	1.9	0.5			
28	19	558,000	2.8	0.5			
29	18	468,000	2.4	0.4			

**Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water**

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: APRIL, 2003

DEP Form No.:	62-555.910(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	(Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	15	122,000	0.2	0.5			
31							
Total	XXXXXX	18,194,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXX
Avg.	XXXXXX	606,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXX
Max.	XXXXXX	750,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXX

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm*	Acrylamide Level - _____ %*
---------------------------	-----------------------------

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm*	Epichlorohydrin Level - _____ %*
---------------------------	----------------------------------

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: MAY, 2003

DEP Form No.: <u>62-699.310(3)</u>
Form Title: <u>Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water</u>
Effective Date: <u>December 19, 1994</u>
DEP Application No.: _____
(Filled in by DEP)

COPY

- Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• **System Name:** Indiantown Water Company PWS Identification No.: 4430667

• **System Owner Name:** Indiantown Company Inc. Telephone No.: 772-597-2121

Address: 15851 S.W. Farms Rd. /P.O. Box 397

City: Indiantown, State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1766

• Total Population Served by System at End of Reporting Month: 5298

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• **Treatment Plant Name:** Indiantown Water Company Telephone No.: 772-597-2121

Address: 15851 SW. Farms Rd./P.O. Box 397

City: _____ State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: MAY, 2003

USE Form No.: 82-555.9103

Form Title: Monthly Operation Report for Public Water

Systems that Use Ground Water and for

Consecutive Public Water Systems that

Treat Their Water

Effective Date: December 18, 1994

DEF Application No.: _____

(Filed in by DEF)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: MAY, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) ¹	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
1	17	489,000	2.6	0.4			
2	18	463,000	2.9	0.8			
3	19	519,000	2.9	0.8			
4	20	585,000	3.4	0.6			
5	24	636,000	3.0	1.0			
6	20	596,000	2.2	0.6			
7	24	604,000	3.1	0.6			
8	21	592,000	3.9	0.7			
9	21	585,000	3.5	0.5			
10	20	585,000	3.2	0.6			
11	24	636,000	3.6	0.4			
12	24	644,000	2.7	0.4			Hydramat Flushing
13	21	650,000	1.8	0.2			(1)
14	20	628,000	1.2	0.6			(1)
15	21	648,000	1.2	0.2			
16	19	591,000	1.6	0.3			
17	20	572,000	1.5	0.3			
18	18	577,000	1.3	0.3			
19	22	622,000	1.9	0.4			
20	19	569,000	2.2	0.4			
21	20	649,000	2.6	0.5			
22	21	630,000	2.2	1.0	6	0.4	
23	21	598,000	2.5	0.7			
24	19	534,000	2.5	1.0			
25	17	548,000	2.2	0.6			
26	22	573,000	2.1	0.8			
27	24	614,000	3.6	1.0			
28	19	515,000	3.3	1.0			
29	16	492,000	1.7	0.6			

Operation Report for Public Water Systems that Use Ground Water for Consecutive Public Water Systems that Treat Their Water

PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: MAY, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEP Application No.: _____
(Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) ¹	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
30	16	488,000	1.0	1.0			
31	17	513,000	1.2	0.4			
Total	XXXXXXX	17,945,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	579,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	650,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

¹ If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

¹ If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: JUNE, 2003

DEP Form No.: <u>62-699.310(3)</u>
Form Title: <u>Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water</u>
Effective Date: <u>December 19, 1994</u>
DEP Application No.: _____
(Filled In by DEP)

COPY

- Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System
Name: Indiantown Water Company

PWS Identification No.: 4430667

• System Owner
Name: Indiantown Company Inc.

Telephone No.: 772 -597-2121

Address: 15851 S.W. Farms Rd. /P.O. Box 397
City: Indiantown,

State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1772

• Total Population Served by System at End of Reporting Month: 5,316

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant
Name: Indiantown Water Company

Telephone No.: 772 -597-2121

Address: 15851 SW. Farms Rd./P.O. Box 397

City: _____ State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-C

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Dean Smiley	5715	A	2
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	B	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: JUNE, 2003

Use Form No.: 62-555.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 19, 1994
 DEP Application No.: _____
 (Filled in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: JUNE, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
1	19	542,000	1.6	0.3			
2	18	539,000	1.8	0.3			
3	18	537,000	1.6	0.2			
4	16	473,000	1.4	0.2			
5	16	470,000	1.5	0.6			
6	15	531,000	1.8	0.3			
7	15	502,000	2.4	1.0			
8	19	450,000	2.5	0.4			
9	20	579,000	3.5	1.0			
10	18	548,000	3.8	0.4			
11	19	459,000	3.4	1.2			
12	17	719,000	3.1	0.4			
13	19	531,000	2.6	0.8			
14	18	549,000	2.3	0.5			
15	19	563,000	2.6	0.6			
16	21	569,000	2.2	0.6			
17	18	539,000	2.2	0.7			
18	18	558,000	3.1	0.6			
19	19	540,000	2.0	0.6			
20	18	521,000	1.6	0.4			
21	20	528,000	2.7	0.4			
22	18	484,000	2.5	0.3			
23	20	505,000	2.2	0.4	6	0.4	
24	18	479,000	1.2	0.4			
25	15	482,000	1.0	0.4			
26	15	496,000	1.1	0.4			
27	16	503,000	1.4	0.4			
28	16	479,000	2.0	0.3			
29	16	493,000	2.4	0.6			

Operation Report for Public Water Systems that Use Ground Water for Consecutive Public Water Systems that Treat Their Water

em PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: JUNE, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water
Systems that Use Ground Water and for
Consecutive Public Water Systems that
Treat Their Water
Effective Date: December 19, 1994
DEP Application No.:
Filled in by DEP:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	16	501,000	3.5	0.4			
31							
Total	XXXXXXX	15,669,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	522,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	579,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTRANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

*The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

*The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

**Monthly Operation Report for Public Water Systems that Use Ground Water
and for Consecutive Public Water Systems that Treat Their Water**

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: July 2003

DEP Form No.:	62-699.310(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	
(Filled in by DEP)	

- * Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

COPY

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System
Name: Indiantown Water Company

PWS Identification No.: 4430667

• System Owner
Name: Indiantown Company Inc.

Telephone No.: 772-597-2121

Address: 15851 S.W. Farms Rd. /P.O. Box 397

City: Indiantown,

State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,779

• Total Population Served by System at End of Reporting Month: 5,319

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant
Name: Indiantown Water Company

Telephone No.: 772-597-2121

Address: 15851 SW. Farms Rd./P.O. Box 397

City: _____

State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-C

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	B	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: JULY, 2003

Use Form No.:

82-555.910(3)

Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

Effective Date:

December 18, 1994

DEP Application No.:

(Filed in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: JULY, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☐ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
1	16	510,000	2.2	0.2			
2	17	491,000	1.9	0.4			
3	17	503,000	2.0	0.2			
4	14	466,000	1.6	0.2			
5	16	509,000	1.4	0.2			
6	19	527,000	1.9	0.4			
7	16	504,000	2.2	0.4			
8	18	545,000	1.9	0.3			
9	15	469,000	2.2	0.6			
10	18	529,000	2.2	0.3			
11	16	488,000	2.0	0.5			
12	17	512,000	2.7	0.4			
13	20	553,000	2.6	0.3			
14	17	549,000	1.1	0.2			
15	17	504,000	1.0	0.2			
16	16	490,000	1.0	0.2			
17	16	481,000	2.8	0.2			
18	19	497,000	4.0	0.4			
19	16	469,000	1.0	0.3			
20	20	527,000	1.0	0.6			
21	17	635,000	2.8	0.6			
22	19	609,000	2.9	0.4	6	0.2	
23	16	582,000	2.1	0.6			
24	16	523,000	1.0	0.4			
25	15	506,000	1.8	0.4			
26	16	466,000	1.9	0.3			
27	16	441,000	1.5	0.3			
28	15	449,000	1.7	0.2			
29	24	446,000	2.5	0.4			

Operation Report for Public Water Systems that Use Ground Water
for Consecutive Public Water Systems that Treat Their Water
Item PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
(Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	17	447,000	2.7	0.6			
31	18	451,000	3.4	0.6			
Total	XXXXXXX	15,679,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	505,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	635,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

† If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*
The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*
The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: AUGUST, 2003

DEP Form No.:	62-555.910(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	(Filled in by DEP)

COPY

- Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

I. GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• **System Name:** Indiantown Water Company PWS Identification No.: 4430667

• **System Owner Name:** Indiantown Company Inc. Telephone No.: 772-597-2121

Address: 15851 S.W. Farms Rd. / P.O. Box 397

City: Indiantown, State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,732

• Total Population Served by System at End of Reporting Month: 5,196

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• **Treatment Plant Name:** Indiantown Water Company Telephone No.: 772-597-2121

Address: 15851 SW. Farms Rd. / P.O. Box 397

City: Indiantown, State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
Don Johnson	5216	B	5
Don Johnson	2816	B	5
Ernie Eugene Watson	8649	C	5
Earl Maine	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: AUGUST, 2003

DEP Form No.: 82-655.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 18, 1994
 DEP Application No.: _____
 (Filed in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: AUGUST, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☐ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L) ¹	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
1	14	461,000	1.6	0.3			
2	15	540,000	1.4	0.4			
3	14	326,000	3.8	0.4			
4	20	598,000	3.5	0.6			
5	16	505,000	2.4	0.4			
6	16	504,000	1.9	0.4			
7	16	482,000	1.1	0.6			
8	16	474,000	1.7	0.3			
9	14	487,000	1.3	0.2			
10	17	482,000	1.7	0.2			
11	16	511,000	1.2	0.2			
12	15	488,000	2.8	0.3			
13	17	456,000	3.5	0.3			
14	13	486,000	3.5	0.6			
15	17	491,000	3.8	0.3			
16	17	500,000	3.5	1.0			
17	16	521,000	3.6	0.4			
18	17	560,000	2.0	0.6			
19	16	490,000	1.2	0.3			
20	16	508,000	1.8	0.43			
21	16	490,000	2.4	0.3			
22	16	481,000	1.1	1.0			
23	15	514,000	1.2	0.4			
24	17	521,000	3.4	2.7			
25	17	531,000	3.4	0.4			
26	17	557,000	1.6	2.0			
27	17	514,000	3.9	0.3	7	0.3	
28	13	524,000	1.0	0.3			
29	16	514,000	1.0	0.3			

Operation Report for Public Water Systems that Use Ground Water for Consecutive Public Water Systems that Treat Their Water

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water
Systems that Use Ground Water and for
Consecutive Public Water Systems that
Treat Their Water
Effective Date: December 19, 1994
DEP Application No.:
(Filled in by DEP):

am PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: AUGUST, 2003

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	18	550,000	1.0	0.2			
31	20	607,000	3.4	0.2			
Total	XXXXXXX	15,664,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXXXXX
Avg.	XXXXXXX	505,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX
Max.	XXXXXXX	607,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: SEPTEMBER, 2003

DEF Form No. 62-699.310(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEF Application No.: _____
FPMed to by DEF: _____

COPY

Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System
Name: Indiantown Water Company PWS Identification No.: 4430667

• System Owner
Name: Indiantown Company Inc. Telephone No.: 772-597-
Address: 15851 S.W. Farms Rd. /P.O. Box 397
City: Indiantown, State: FL Zip Code: 34956

System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,782
• Total Population Served by System at End of Reporting Month: 7,346

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant
Name: Indiantown Water Company Telephone No.: 772-597-2121
Address: 15851 SW. Farms Rd./P.O. Box 397
City: _____ State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
DON JOHNSON	2816	B	5
ERNIE E. WATSON	8649	B	5
EARL MAINE	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number:

4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: SEPTEMBER, 2003

USE Form No.:

62-655.310(3)

Form Title: Monthly Operation Report for Public Water

Systems that Use Ground Water and for

Consecutive Public Water Systems that

Treat Their Water

Effective Date:

December 18, 1994

DEP Application No.:

(Filed in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: SEPTEMBER, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
1	18	612,000	3.4	0.3			
2	21	656,000	1.5	0.2			
3	21	637,000	1.5	0.3			
4	16	457,000	1.3	0.3			
5	12	422,000	1.7	0.4			
6	15	417,000	1.0	0.2			
7	13	462,000	1.0	0.2			
8	16	477,000	1.8	0.4			
9	15	449,000	3.7	0.4			
10	15	445,000	2.3	0.4			
11	14	485,000	3.1	0.6			
12	17	519,000	2.9	0.3			
13	15	471,000	1.7	0.3			
14	16	486,000	2.0	0.4			
15	15	513,000	1.5	0.5	6	0.2	
16	16	475,000	1.8	0.4			
17	15	455,000	3.7	0.4			
18	15	459,000	1.7	0.9			
19	13	464,000	3.0	0.3			
20	17	470,000	2.0	1.4			
21	15	479,000	2.0	0.2			
22	17	512,000	1.6	1.3			
23	15	466,000	2.5	0.4			
24	15	470,000	1.0	1.0			
25	15	468,000	1.6	0.4			
26	14	419,000	2.1	1.2			
27	13	428,000	2.8	0.6			
28	15	455,000	3.1	1.0			
29	14	457,000	2.2	1.0			

Operation Report for Public Water Systems that Use Ground Water or Consecutive Public Water Systems that Treat Their Water

PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: SEPTEMBER, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEP Application No.: _____
(Filled in by DEP: _____)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	15	420,000	3.0	0.4			
31							
Total	XXXXXXX	14,405,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	480,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	656,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: OCTOBER, 2003

DEF Form No.:	62-699.310(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 18, 1994
DEF Application No.:	
Filled in by: DEF	

COPY

Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System Name: Indiantown Water Company

PWS Identification No.: 4430667

• System Owner Name: Indiantown Company Inc.

Telephone No.: 772-597-2121

Address: 15851 S.W. Farms Rd. / P.O. Box 397

City: Indiantown,

State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,782

• Total Population Served by System at End of Reporting Month: 5,346

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant Name: Indiantown Water Company

Telephone No.: 772-597-2121

Address: 15851 SW. Farms Rd. / P.O. Box 397

City:

State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
DON JOHNSON	2816	B	5
ERNIE E. WATSON	8649	B	5
EARL MAINE	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: OCTOBER, 2003

DEP Form No.: 82-655.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 18, 1994
 DEP Application No.: _____
 (Filed in by DEP)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: OCTOBER, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine); ☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
1	12	422,000	2.0	0.4			
2	14	412,000	2.1	0.6			
3	15	435,000	1.7	0.2			
4	12	409,000	1.0	0.4			
5	15	513,000	1.9	0.3			
6	17	500,000	1.9	0.3			
7	14	477,000	1.8	0.4			
8	16	489,000	2.9	0.8			
9	16	506,000	2.0	0.5			
10	16	465,000	2.5	0.8			
11	16	497,000	2.7	0.6			
12	16	490,000	2.8	0.8			
13	15	512,000	1.0	0.6	6	0.5	
14	18	540,000	3.0	1.0			
15	15	482,000	3.3	0.5			
16	16	481,000	2.8	0.8			
17	15	458,000	2.0	0.3			
18	16	492,000	2.2	0.8			
19	20	597,000	2.6	0.5			
20	18	609,000	2.4	0.6			
21	14	455,000	1.0	0.3			
22	14	451,000	1.0	0.2			
23	16	463,000	1.6	0.4			
24	15	481,000	2.0	0.3			
25	17	514,000	2.5	0.9			
26	19	550,000	2.6	0.5			
27	16	526,000	2.6	1.0			
28	16	490,000	2.6	0.4			
29	16	487,000	1.7	0.6			

Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: OCTOBER, 2003

DEP Form No.:	62-555.910(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	(Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	16	479,000	1.7	0.3			
31	16	478,000	1.4	0.3			
Total	XXXXXXX	15,460,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	489,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	609,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

† If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

II. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm*	Acrylamide Level - _____ %*
---------------------------	-----------------------------

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm*	Epichlorohydrin Level - _____ %*
---------------------------	----------------------------------

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: NOVEMBER

DEF Form No.: <u>62-699.310(3)</u>
Form Title: <u>Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water</u>
Effective Date: <u>December 19, 1994</u>
DEF Application No.: _____
Filed In by: DEF

COPY

Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

• System Name: Indiantown Water Company

PWS Identification No.: 4430667

• System Owner Name: Indiantown Company Inc.

Telephone No.: 772-597-2121

Address: 15851 S.W. Farms Rd. /P.O. Box 397

City: Indiantown,

State: FL Zip Code: 34956

• System Type: ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive

• Number of Service Connections at End of Reporting Month: 1,793

• Total Population Served by System at End of Reporting Month: 5,379

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

• Treatment Plant Name: Indiantown Water Company

Telephone No.: 772-597-2121

Address: 15851 SW. Farms Rd./P.O. Box 397

City: _____

State: FL Zip Code: 34956

• Permitted Maximum Day Capacity of Plant: 1,296,000 gpd

• Plant Category and Class per Rule 62-699.310(3), F.A.C.: 4-c

• Lead/Chief Plant Operator:

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

• Other Certified Plant Operators (attach additional sheets if necessary):

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
DON JOHNSON	2816	B	5
ERNIE E. WATSON	8649	B	5
EARL MAINE	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: NOVEMBER, 2003

DEF Form No.: 82-655.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 18, 1994
 DEF Application No.: _____
 (Filled in by DEF)

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: NOVEMBER, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
1	17	490,000	1.5	0.2			
2	16	489,000	1.9	0.4			
3	17	496,000	2.9	0.9			
4	15	484,000	2.0	0.4			
5	15	448,000	2.6	0.2			
6	14	424,000	2.0	0.7			
7	16	453,000	2.0	0.3			
8	16	467,000	1.9	0.4			
9	16	513,000	2.2	0.3			
10	16	492,000	2.0	0.6			
11	16	453,000	2.1	0.4	6	0.3	
12	15	477,000	2.5	0.9			
13	16	478,000	2.0	0.9			
14	15	479,000	2.3	1.1			
15	17	480,000	2.4	0.4			
16	17	537,000	2.2	1.0			
17	19	554,000	2.8	0.4			
18	17	532,000	2.3	0.9			
19	17	498,000	1.8	0.2			
20	13	453,000	1.0	0.6			
21	13	473,000	1.0	0.2			
22	14	483,000	1.1	0.6			
23	16	525,000	1.9	0.4			
24	18	555,000	2.6	0.8			
25	16	524,000	3.1	0.6			
26	17	499,000	2.4	0.6			
27	20	537,000	1.3	0.2			
28	17	549,000	2.0	0.4			
29	19	562,000	2.7	0.8			

Operation Report for Public Water Systems that Use Ground Water
for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: NOVEMBER, 2003

DEP Form No.:	62-555.910(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 19, 1994
DEP Application No.:	(Filled in by DEP)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L) ¹	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L) ¹	
30	17	505,000	3.3	0.6			
31							
Total	XXXXXXX	14,909,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	497,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	562,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

* If at any time the residual disinfectant concentration at the entry to the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

¹ If at any time the residual disinfectant concentration in the distribution system drops below the equivalent of 0.2 mg/L of free available chlorine, immediately increase the chlorine dose and/or flush appropriate portions of the distribution system until the residual disinfectant concentration is at least equivalent to 0.2 mg/L of free available chlorine and notify the Department or the appropriate ACPHU by wire or telephone within 24 hours pursuant to Rule 62-555.350(3), F.A.C.

III. SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? _____ If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm*	Acrylamide Level - _____ %*
---------------------------	-----------------------------

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? _____ If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm*	Epichlorohydrin Level - _____ %*
---------------------------	----------------------------------

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: DECEMBER, 2003

DEF Form No.:	62-699.310(3)
Form Title:	Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date:	December 18, 1994
DEF Application No.:	(Filed by DEF)

Refer to Chapter 62-699, F.A.C., for plant staffing requirements. Class A plants must be staffed by a certified operator 24 hours per day for seven days per week; Class B plants must be staffed by a certified operator seven days per week; Class C plants must be staffed/visited by a certified operator seven days per week or at least six days per week depending on the type and capacity of treatment at the plant; and Class D plants must be visited/checked by a certified operator and/or water system representative at least five days per week. The one day per week that a Class C plant may not be staffed/visited should, if possible, be a day when the plant is not in operation; and the two days per week that a Class D plant may not be visited/checked should, if possible, be days when the plant is not in operation and should be non-consecutive days if the plant is in operation six or seven days per week.

COPY

GENERAL WATER SYSTEM AND WATER TREATMENT PLANT INFORMATION

Water System Name and PWS Identification Number, System Owner, System Type, Service Connections to System, and Population Served by System

- **System Name:** Indiantown Water Company **PWS Identification No.:** 4430667
- **System Owner Name:** Indiantown Company Inc. **Telephone No.:** 772-597-2121
- Address:** 15851 S.W. Farms Rd. /P.O. Box 397
- City:** Indiantown, **State:** FL **Zip Code:** 34956
- **System Type:** ☒ community; ☐ non-transient non-community; ☐ non-community; ☐ consecutive
- **Number of Service Connections at End of Reporting Month:** 1795
- **Total Population Served by System at End of Reporting Month:** 5385

Water Treatment Plant Name, Permitted Capacity of Plant, Plant Category and Class, and Plant Operators

- **Treatment Plant Name:** Indiantown Water Company **Telephone No.:** 772-597-2121
- Address:** 15851 SW. Farms Rd./P.O. Box 397
- City:** Indiantown, **State:** FL **Zip Code:** 34956
- **Permitted Maximum Day Capacity of Plant:** 1,296,000 gpd
- **Plant Category and Class per Rule 62-699.310(3), F.A.C.:** 4-C
- **Lead/Chief Plant Operator:**

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
James Hewitt	3821	B	5

- **Other Certified Plant Operators (attach additional sheets if necessary):**

Name	Certificate Number	Class (A, B, C, or D)	Day(s)/Shift(s) Worked
DON JOHNSON	2816	A B	5
ERNIE E. WATSON	8649	B	5
EARL MAINE	4644	C	5

and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667

Treatment Plant Name: Indiantown Water Company

Reporting Month/Year: DECEMBER, 2003

USE Form No.: 82-555.910(3)
 Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
 Effective Date: December 18, 1994
 DEP Application No.: _____
 Filed in by DEP: _____

II. SUMMARY OF DAILY WATER TREATMENT DATA FOR REPORTING MONTH

• Reporting Month/Year: DECEMBER, 2003

• Type of Residual Disinfectant Maintained in Distribution System Served by Plant: ☒ free chlorine; ☐ combined chlorine (chloramine);
☐ chlorine dioxide

• Summary of Daily Water Treatment Data for Reporting Month:

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)	
1	18	553,000	3.8	0.9			
2	18	543,000	2.0	0.6			
3	17	506,000	2.2	0.6			
4	17	528,000	2.3	0.4			
5	19	523,000	1.9	0.4			
6	16	470,000	1.5	0.3			
7	16	496,000	1.0	0.3			
8	19	564,000	2.7	0.4			
9	18	527,000	3.2	1.0			
10	18	556,000	2.1	1.0			
11	17	585,000	2.1	1.0	7	1.0	
12	16	473,000	2.0	0.8			
13	18	514,000	0.6	0.6			
14	20	631,000	2.1	0.7			
15	19	620,000	3.9	0.9			
16	16	482,000	2.1	0.8			
17	16	462,000	2.6	0.7			
18	16	448,000	2.2	0.7			
19	14	434,000	2.4	0.5			
20	16	465,000	2.7	0.7			
21	16	481,000	2.4	0.5			
22	16	472,000	2.4	0.6			
23	17	498,000	2.1	0.4			
24	16	490,000	2.2	0.8			
25	18	491,000	1.4	0.2			
26	14	493,000	1.3	0.4			
27	17	655,000	2.8	0.8			
28	17	498,000	2.7	1.0			
29	19	520,000	1.8	0.7			

Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water

System PWS Identification Number: 4430667
Treatment Plant Name: Indiantown Water Company
Reporting Month/Year: DECEMBER, 2003

DEP Form No.: 62-555.910(3)
Form Title: Monthly Operation Report for Public Water Systems that Use Ground Water and for Consecutive Public Water Systems that Treat Their Water
Effective Date: December 19, 1994
DEP Application No.: _____
(Filled in by DEP: _____)

Day of the Month	Hours Plant in Operation	Quantity of Finished Water Produced by Plant (gallons)	Lowest Residual Disinfectant Concentration at Entry to Distribution System (mg/L)*	Residual Disinfectant in Distribution System			Reported Emergency or Abnormal Operating Conditions
				Lowest Residual Disinfectant Concentration at Remote Point (mg/L)†	Number of Instances Where Residual Disinfectant Measurements Taken at Total Coliform Sampling Points	Lowest Residual Disinfectant Concentration at Total Coliform Sampling Points (mg/L)†	
30	18	497,000	2.3	0.9			
31	17	535,000	2.4	0.6			
Total	XXXXXXX	16,010,000	XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXXXXXXXX	XXXXXXX
Avg.	XXXXXXX	516,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX
Max.	XXXXXXX	655,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	XXXXXXX

SUMMARY OF USE, AT WATER TREATMENT PLANT, OF POLYMER CONTAINING ACRYLAMIDE, POLYMER CONTAINING EPICHLOROHYDRIN, AND/OR IRON AND MANGANESE SEQUESTANT (complete this part only for the reporting month of December each year)

- Is any polymer containing the monomer acrylamide used at the treatment plant? N/A If yes, the polymer dose and the acrylamide level in the polymer are as follows:

Polymer Dose - _____ ppm* Acrylamide Level - _____ %*

* The acrylamide level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for acrylamide exceeds 0.05% dosed at 1 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

- Is any polymer containing the monomer epichlorohydrin used at the treatment plant? N/A If yes, the polymer dose and the epichlorohydrin level in the polymer are as follows:

Polymer Dose - _____ ppm* Epichlorohydrin Level - _____ %*

* The epichlorohydrin level provided on this form may be based on the polymer manufacturer's certification or on third-party certification. If the combination (or product) of dose and monomer level for epichlorohydrin exceeds 0.01% dosed at 20 ppm (or equivalent), it is a violation of State primary drinking water standards per Rules 62-550.310(2)(d) and 62-550.325(1), F.A.C.

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Monthly)	mg				Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement							
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement			0.01 (Max)	mg/L		Daily during any overflow	Grab
pH	Sample Measurement							
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement			6.0 (Min) 8.5 (Max)	S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement			5.0 (Min)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

Dean S. Smiley, Jr.

(772)

2003/02/26

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

NO DISCHARGE FROM SITE ☒

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	ND						%	0		
PARM Code: PAN-6H Mon. Site No: EFF-6	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code: PAN-3B Mon. Site No: EFF-6	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No: 0005+6 Mon Site No: EFF-2	Permit Measurement	Report (Total Monthly)	mg				Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement							
STORET No: 50060 Mon Site No: EFF-2	Permit Measurement			0.01 (Max)	mg/L		Daily during any overflow	Grab
pH	Sample Measurement							
STORET No: 00400 Mon Site No: EFF-2	Permit Measurement			6.0 (Min) 8.5 (Max)	SD		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No: 00300 Mon Site No: EFF-2	Permit Measurement			5.0 (Min)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	NP						%	0		
PARM Code TAN-6H Mon. Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon. Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D						MG	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.0 (Min.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				2.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
		ND						%	-		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.350						MGD	0		
STORET No: 50050 Y Mon Site No: EFF-6	Permit Measurement	.04 (An. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	.483						MGD	0		
STORET No: 50050 I Mon Site No: EFF-6	Permit Measurement	Report (Mo. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.0			Mg/L	0		
STORET No: 80082 Y Mon Site No: EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement				3.5	6.3		Mg/L	0		
STORET No: 80082 I Mon Site No: EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				5.2			Mg/L	0		
STORET No: 00530 Y Mon Site No: EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				4.0	5.6		Mg/L	0		
STORET No: 00530 I Mon Site No: EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement				7.0 S.U.	7.6 S.U.		S.U.	0		
STORET No: 00400 I Mon Site No: EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement				2.2			Mg/L	0		
STORET No. 00620 Mon. Site No. EFF-6	Permit Measurement				12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement				21.2	18		Mg/L	0		
STORET No. 00600 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour PPC
Phosphorus, Total as P	Sample Measurement				5.6	4.2		Mg/L	0		
STORET No. 00665 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour PPC
Fecal Coliform Bacteria	Sample Measurement				14.2			#/100ml	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement				200 (An. Avg.)			#/100ml		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement				< 1	< 1		#/100ml	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		#/100ml		Weekly	Grab
TRC for disinfection	Sample Measurement				1.0			Mg/L	0		
STORET No. 50060 Mon. Site No. EFF-6	Permit Measurement				0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/31/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mgd						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-2 Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mgd						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.275					MGD	0		
STORET No. 50050-3 Mon Site No. EFF-7	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Recording flowmeters and totalizer
Flow	Sample Measurement	0.067						MGD	0		
STORET No. 50050-4 Mon Site No. EFF-8	Permit Measurement	0.107 (Am Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.151					MGD	0		
STORET No. 50050-5 Mon Site No. EFF-8	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.097						MGD	0		
STORET No. 50050-6 Mon Site No. EFF-9	Permit Measurement	0.142 (Am Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.124					MGD	0		
STORET No. 50050-7 Mon Site No. EFF-9	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				1.8			mg/L	0		
STORET No. 000530 Mon Site No. EFF-6	Permit Measurement				1.010 (Mo. Avg)			mg/L		Weekly	8-hour EPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 1/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 1/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	245			Mg/L	0		
TSS	Sample Measurement	237			Mg/L	0		
	Sample Measurement							
	Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Discharge y/ft

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						2.2				
2							2.3				
3							2.3				
4							2.3				
5							2.3				
6							2.3				
7							2.2				
8							2.2				
9							2.3				
10							2.4				
11							2.4				
12							2.3				
13							2.3				
14							2.3				
15							2.2				
16							2.1				
17							2.0				
18							2.0				
19							1.9				
20							1.8				
21							1.7				
22							1.7				
23							1.6				
24							1.5				
25							1.5				
26							1.4				
27							1.4				
28							1.4				
29							1.3				
30							1.2				
31							1.2				

PLANT STAFFING:

Day Shift Operator Class: A Certificate No: 1805 Name: JOHAN S. SMILBY, JR.
 Evening Shift Operator Class: B Certificate No: 3634 Name: JOHN C. JOHANSON, SR.
 Night Shift Operator Class: B Certificate No: 6747 Name: JAMES G. HOWITT
 Lead Operator Class: B Certificate No: 9439 Name: ERIN B. WATSON

Type of Effluent Disposal or Reclaimed Water Reuse: EVAP. POND / IRRIGATION
 Limited Wet Weather Discharge Activated: Yes No: Not Applicable If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Discharge yd

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Decolorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Ion. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						3.8				
2							3.7				
3							3.9				
4							3.8				
5							3.8				
6							3.8				
7							3.7				
8							3.7				
9							3.6				
10							3.6				
11							3.5				
12							3.4				
13							3.3				
14							3.2				
15							3.2				
16							3.2				
17							3.1				
18							3.1				
19							3.1				
20							3.0				
21							3.0				
22							3.0				
23							3.0				
24							2.9				
25							2.9				
26							2.8				
27							2.8				
28							2.7				
29							2.6				
30							2.6				
31	↓						2.5				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Discharge y/11

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						0.4				
2							0.4				
3							0.3				
4							0.3				
5							0.2				
6							0.1				
7							0				
8							0				
9							0				
10							0				
11							0				
12							0				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
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22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0				
31							0				

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 63%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max) 7.6 ^{S.U.}	pH (Min) 7.0 ^{S.U.}	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall, (inches)
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.530						7.1		1.9	0
2	.520	2.6	252	3.2	263		7.2	< 1	1.4	0.2
3	.500						7.6		1.5	0
4	.520						6.7		1.7	0
5	.540						7.4		1.9	0
6	.510						7.3		1.3	0
7	.480	< 2.0	185	4.2	234		7.2	< 1	1.9	0
8	.480						7.3		1.2	0
9	.520						7.3		1.7	0
10	.490						7.0		1.2	0
11	.510						7.0		1.1	0
12	.500						7.2		1.0	0
13	.470						7.1		1.5	0
14	.480	6.3	326	3.4	268		7.3	< 1	1.9	0
15	.470						7.1		2.2	0
16	.430						7.2		1.6	0
17	.460						7.1		1.9	0
18	.520						7.0		1.6	0
19	.460						7.1		1.4	0
20	.490						7.2		1.9	0
21	.480	< 2.0	265	5.6	205		7.1	< 1	1.2	0
22	.420						7.2		2.1	0
23	.510						7.2		2.2	0
24	.470						7.4		2.2	0
25	.470						7.3		1.6	0
26	.490						7.1		2.1	0
27	.470						7.2		1.2	0
28	.440	4.4	196	3.6	216		7.0	< 1	1.8	0
29	.400						7.2		2.2	0
30	.510						7.3		2.2	0
31	.450						7.3		1.7	0

Cont. R001

Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 6390

Version 3/23/99

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 1/01/03

To: 1/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

63%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.299	.299			1.7	1.2				
2			.271	.271		2.2	1.9	1.3				
3			.239	.239			2.0	1.4				
4			.214	.214			2.2	1.5				
5			.209	.209			2.4	1.6				
6			.217	.217			2.6	1.7				
7			.229	.229		2.4	2.7	1.8				
8			.336		.336		2.8	1.9				
9			.329		.329		2.7	1.8				
10			.326		.326		2.6	1.7				
11			.292		.292		2.6	1.7				
12			.291		.291		2.6	1.7				
13			.306		.306		2.5	1.6				
14			.333	.333		1.2	2.5	1.6				
15			.333	.333			2.6	1.7				
16			.248	.248			2.8	1.7				
17			.290	.290			2.9	1.8				
18			.312	.312			3.1	1.9				
19			.283	.283			3.2	2.0				
20			.305	.305			3.3	2.0				
21			.320	.320		1.6	3.4	2.1				
22			.275	.275			3.6	2.2				
23			.309	.309			3.7	2.3				
24			.287		.287		3.7	2.3				
25			.236		.236		3.5	2.2				
26			.257		.257		3.2	2.1				
27			.316		.316		3.0	2.0				
28			.270		.270	1.8	2.9	1.9				
29			.240		.240		2.8	1.8				
30			.347		.347		2.7	1.7				
31	✓	✓	.016		.016		2.6	1.7				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

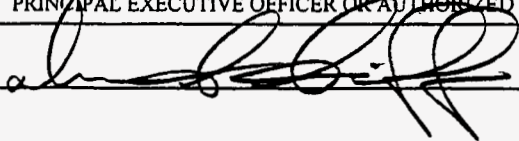
WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND						MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement			0.01 (Max)				mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement			6.0 (Min)	8.5 (Max)			S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement			5.0 (Min)				mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Deas S. Smiley, Jr. Asst. Supv.		(772) 597-3496	2003/03/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/21/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	NO						%	0		
PARM Code: LAN-6H Mon Site No: EFF-1	Permit Requirement				EC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code: LAN-3B Mon Site No: EFF-1	Permit Requirement				EC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No: 0005+6 Mon Site No: EFF-2	Permit Measurement	Reports (Total Month)	mg				Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement							
STORET No: 50060 Mon Site No: EFF-2	Permit Measurement			0.01 (Max)	mg/L		Daily during any overflow	Grab
pH	Sample Measurement							
STORET No: 00400 Mon Site No: EFF-2	Permit Measurement			6.0 (Min) 8.5 (Max)	S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No: 00300 Mon Site No: EFF-2	Permit Measurement			5.0 (Min)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon Site No EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No: 00056 Mon Site No: EFF-3	Permit Measurement	Report (Total Month)	mg				Continuous during any overflow	Calculated Flow
pH	Sample Measurement							
STORET No: 00400 Mon Site No: EFF-3	Permit Measurement			0.0 (Min.)	0.5 (Max.)		Daily during any overflow	Grab
TRC for dechlorination	Sample Measurement							
STORET No: 50060 Mon Site No: EFF-3	Permit Measurement			0.01 (Max.)			Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No: 00300 Mon Site No: EFF-3	Permit Measurement			5.0 (Min.)			Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.364			MGD	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	.480			MGD	0		
STORET No. 50050 I Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			5.2	mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			8.7	mg/L	0		
STORET No. 80082 I Mon. Site No. EFF-6	Permit Measurement			25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	Weekly	8-hour FPC
TSS	Sample Measurement			5.1	mg/L	0		
STORET No. 00530 Y Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)			Weekly	8-hour FPC
TSS	Sample Measurement			6.4	mg/L	0		
STORET No. 00530 I Mon. Site No. EFF-6	Permit Measurement			30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	Weekly	8-hour FPC
pH	Sample Measurement			6.9	S.U.	0		
STORET No. 00400 I Mon. Site No. EFF-6	Permit Measurement			6.0 (Min.)	8.5 (Max.)		6 Days/week	Grab
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement				0.04			Mg/L	0		
STORET No. 00620 Mon. Site No. EFF-6	Permit Measurement				12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement				31.8	28.8		Mg/L	0		
STORET No. 00600 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour EPC
Phosphorus, Total as P	Sample Measurement				6.1	5.2		Mg/L	0		
STORET No. 00665 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour EPC
Fecal Coliform Bacteria	Sample Measurement				4.5			Mg/L	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement				200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement				< 4	1		#/100mL	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement				Report (Mo. Geo. Mean)	3800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement				1.2			Mg/L	0		
STORET No. 50060 Mon. Site No. EFF-6	Permit Measurement				0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-P Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.059					MGD	0		
STORET No. 50050-O Mon Site No. EFF-7	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	0.052						MGD	0		
STORET No. 50050-Y Mon Site No. EFF-8	Permit Measurement	0.107 (Am. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.007					MGD	0		
STORET No. 50050-R Mon Site No. EFF-8	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.098						MGD	0		
STORET No. 50050-S Mon Site No. EFF-9	Permit Measurement	0.143 (Am. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.052					MGD	0		
STORET No. 50050-T Mon Site No. EFF-9	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS #7	Sample Measurement				3.9			MG	0		
STORET No. 00530-7 Mon Site No. EFF-9	Permit Measurement				100 (Mo. Avg.)			mg/l		Weekly	8-hour EPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 2/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 2/28/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: —

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	283 ^{Max}			Max	0		
TSS	Sample Measurement	220 ^{Max}			Max	0		
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 2/01/03

To: 2/28/03

Discharge y/n (n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Decolorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	<u>ND</u>						<u>1.4</u>				
2							<u>1.5</u>				
3							<u>1.8</u>				
4							<u>1.8</u>				
5							<u>1.8</u>				
6							<u>1.8</u>				
7							<u>1.8</u>				
8							<u>1.8</u>				
9							<u>1.8</u>				
10							<u>1.9</u>				
11							<u>1.9</u>				
12							<u>2.0</u>				
13							<u>2.0</u>				
14							<u>2.1</u>				
15							<u>2.1</u>				
16							<u>2.1</u>				
17							<u>2.1</u>				
18							<u>2.1</u>				
19							<u>2.0</u>				
20							<u>2.1</u>				
21							<u>2.2</u>				
22							<u>2.2</u>				
23							<u>2.3</u>				
24							<u>2.3</u>				
25							<u>2.4</u>				
26							<u>2.5</u>				
27							<u>2.6</u>				
28							<u>2.6</u>				
29	<u>↓</u>						<u>2.7</u>				
30											
31											

PLANT STAFFING:

Day Shift Operator

Evening Shift Operator

Night Shift Operator

Lead Operator

Class: A

Class: B

Class: B

Class: B

Certificate No:

Certificate No:

Certificate No:

Certificate No:

Name:

Name:

Name:

Name:

DEAN S. SMILKY JR.

DON C. JOHNSON, S

JAMES G. HEWITT

ERNIE WATSON

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes: No: (Not Applicable)

EVAP. / PERC. PONDS / IRRIGATION
If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 2/01/03

To: 2/28/03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)			
Code	00056	00400	00400	74055	50060	50060	85327			
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2			
1	ND						2.5			
2							2.6			
3							2.8			
4							2.8			
5							2.8			
6							3.0			
7							3.1			
8							3.3			
9							3.5			
10							3.5			
11							3.5			
12							3.5			
13							3.6			
14							3.6			
15							3.7			
16							3.7			
17							3.7			
18							3.7			
19							3.7			
20							3.8			
21							3.8			
22							3.8			
23							3.9			
24							3.9			
25							3.9			
26							3.9			
27							4.0			
28	✓						4.0			
29										
30										
31										

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 2/01/03

To: 2/28/03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						0				
2							0				
3							0				
4							0				
5							0				
6							0				
7							0				
8							0				
9							0				
10							0				
11							0				
12							0				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
20							0				
21							0				
22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28	↓						0				
29											
30											
31											

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FL0029939

From: 2/01/03

R001

To: 2/28/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

64%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Situ	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	480					7.6 ^{su}	6.9 ^{su}			
2	520						7.3		1.5	0
3	430						7.1		1.6	0
4	440	7.4	330	7.4	192		7.6	<1	2.2	0
5	440						7.6		1.2	0
6	460						7.4		2.2	0
7	440						7.4		2.0	0
8	470						7.6		2.2	0
9	530						7.3		1.5	0
10	510						7.2		2.0	0
11	440	14	282	7.4	314		7.3	<1	1.5	0
12	360						7.1		1.9	0
13	480						7.2		1.7	0
14	520						6.9		2.1	0
15	500						7.1		2.0	0
16	510						7.1		1.8	1.4
17	490						7.2		1.6	0.2
18	480	6.7	275	6.4	219		6.9	<1	1.9	0
19	450						7.1		1.5	0
20	520						7.0		2.1	2.25
21	510						7.2		1.1	0
22	500						7.1		1.4	0.75
23	560						7.2		1.2	0
24	520						7.0		1.5	0
25	480	6.7	244	4.2	154		7.2	1	2.2	0
26	460						6.9		1.7	0
27	430						7.2		1.3	0
28	500						7.0		1.9	0
29										
30										
31										

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 2/01/03

To: 2/28/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 64%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1											
2											
3											
4	<0.02	21.3	6.1								
5											
6											
7											
8											
9											
10											
11	0.04	31.8	4.9								
12											
13											
14											
15											
16											
17											
18	<0.02	31.5	4.3								
19											
20											
21											
22											
23											
24											
25	<0.02	30.4	5.3								
26											
27											
28											
29											
30											
31											

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 2/14/03

To: 2/28/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 64%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND					2.6	1.8				
2							2.7	1.7				
3							2.4	1.6				
4							2.2	1.4				
5							2.2	1.4				
6							2.2	1.3				
7							1.9	1.3				
8							1.9	1.3				
9							1.9	1.3				
10							1.7	1.3				
11			.134		.134	3.8	1.5	1.2				
12			.109		.109		1.3	1.2				
13			.212		.212		1.1	1.2				
14			.283		.283		1.0	1.2				
15			.316		.316		0.9	1.1				
16			.257		.257		0.8	1.1				
17			.150		.150		0.8	1.1				
18			.190	.190		4.0	0.7	1.0				
19			.012	.012			0.8	1.1				
20							0.7	1.1				
21							0.6	1.2				
22							0.6	1.3				
23							0.5	1.1				
24							0.4	0.9				
25							0.4	0.8				
26							0.3	0.6				
27							0.2	0.5				
28	↓	↓					0.2	0.4				
29												
30												
31												

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

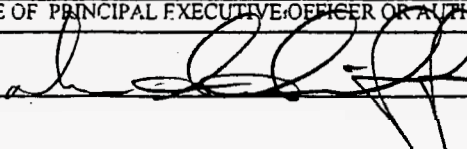
WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. LA.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No: 00056 Mon Site No: EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement										
STORET No: 50060 Mon Site No: EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No: 00400 Mon Site No: EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No: 00300 Mon Site No: EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
DEAN S. SMILKY, JR. ASST. SUPT.		(772) 597-3496	2003/04/24

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/31/03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal-Cyprinella leedsii	Sample Measurement	N/D	N/D					-	0		
PARM Code TAN-5H Mon Site No EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/1/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No. 0005+6 Mon. Site No. EFF-2	Permit Measurement	Report (Total Monthly)	mg				Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement							
STORET No. 50060 Mon. Site No. EFF-2	Permit Measurement			0.01 (Max)	mg/L		Daily during any overflow	Grab
pH	Sample Measurement							
STORET No. 00400 Mon. Site No. EFF-2	Permit Measurement			6.0 (Min) 8.5 (Max)	S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement			5.0 (Min)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	ND			%	0		
PARM Code TAN-6H Mon Site No. EFF-2	Permit Requirement			LC-50 greater than 100%	% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement							
PARM Code TAN-3B Mon Site No. EFF-2	Permit Requirement			LC-50 greater than 100%	% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							
	Sample Measurement							
	Permit Requirement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement				MG	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)	mg				Continuous during any overflow	Calculated Flow
pH	Sample Measurement							
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement			6.0 (Min.)	8.5 (Max.)	1	Daily during any overflow	grab
TRC for dechlorination	Sample Measurement							
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement			0.01 (Max.)		1	Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement			2.0 (Min.)		1	Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				EC-50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				EC-50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 7/1/03
LIMIT: Final
CLASS SIZE: Minor

To: 7/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.356						MGD	0		
STORET No. 50050 Y Mon Site No. EFF-6	Permit Measurement	0.0		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	.534						MGD	0		
STORET No. 50050 I Mon Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.6			Mg/L	0		
STORET No. 80082 Y Mon Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour EPC
CBOD5	Sample Measurement				11.3		15	Mg/L	0		
STORET No. 80082 I Mon Site No. EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour EPC
TSS	Sample Measurement				5.3			Mg/L	0		
STORET No. 00530 Y Mon Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour EPC
TSS	Sample Measurement				7.8		9.2	Mg/L	0		
STORET No. 00530 I Mon Site No. EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour EPC
pH	Sample Measurement				6.9 SU	7.4 SU		S.U.	0		
STORET No. 00400 I Mon Site No. EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
	Measurement						Mg/L	0		
STORET No. 00620 I Mon. Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			33.7	29.9		Mg/L	0		
STORET No. 00600 I Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour EPC
Phosphorus, Total as P	Sample Measurement			5.7	4.5		Mg/L	0		
STORET No. 00665 I Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour EPC
Fecal Coliform Bacteria	Sample Measurement			4.6			#/100mL	0		
STORET No. 74055 Y Mon. Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			< 1	1		#/100mL	0		
STORET No. 74055 I Mon. Site No. EFF-6	Permit Measurement			Report (Mo. Geo. Mean)	800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			0.5			Mg/L	0		
STORET No. 50060 I Mon. Site No. EFF-6	Permit Measurement			0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/21/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/21/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-2 Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.289					MGD	0		
STORET No. 50050-0 Mon Site No. EFF-7	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	0.068						MGD	0		
STORET No. 50050-5 Mon Site No. EFF-8	Permit Measurement	Report (Mo. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.188					MGD	0		
STORET No. 50050-6 Mon Site No. EFF-8	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.097						MGD	0		
STORET No. 50050-7 Mon Site No. EFF-9	Permit Measurement	Report (Mo. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.101					MGD	0		
STORET No. 50050-8 Mon Site No. EFF-9	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				4.2			MG/L	0		
STORET No. 000530-1 Mon Site No. EFF-6	Permit Measurement				10.0 (Mo. Avg)			mg/L		Weekly	8-hour EPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 3/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 3/01/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	263		Mg/L				Mg/L	0		
TSS	Sample Measurement	266		Mg/L				Mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:

FL0029939

Monitoring Period

From:

3/01/03

To:

3/31/03

Discharge y¹¹

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						2.7				
2							2.6				
3							2.7				
4							2.9				
5							2.9				
6							2.8				
7							2.8				
8							2.9				
9							2.9				
10							3.0				
11							3.0				
12							2.8				
13							2.7				
14							2.6				
15							2.8				
16							2.9				
17							2.0				
18							1.8				
19							1.8				
20							2.1				
21							2.4				
22							2.3				
23							2.6				
24							2.5				
25							2.5				
26							2.6				
27							2.6				
28							2.6				
29							2.7				
30							2.7				
31							2.8				

PLANT STAFFING:

Day Shift Operator

Class:

A

Certificate No:

6805

Name:

DEAN S. SMILG, JR.

Evening Shift Operator

Class:

B

Certificate No:

3634

Name:

RON L. JOHNSON, SR.

Night Shift Operator

Class:

B

Certificate No:

6747

Name:

JAMES G. HEWITT

Lead Operator

Class:

B

Certificate No:

9439

Name:

ERNEST WATSON

Type of Effluent Disposal or Reclaimed Water Reuse:

EVAP. / PISC. Ponds / IRRIGATION

Limited Wet Weather Discharge Activated: Yes No

(Not Applicable)

If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 3/01/03

To: 3/31/03

Discharge yⁿ

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						4.0				
2							4.0				
3							4.1				
4							4.2				
5							4.3				
6							4.1				
7							4.2				
8							4.2				
9							4.2				
10							4.2				
11							4.2				
12							4.1				
13							4.0				
14							3.9				
15							3.7				
16							3.8				
17							3.8				
18							3.8				
19							3.8				
20							3.9				
21							3.9				
22							3.8				
23							3.9				
24							3.9				
25							3.9				
26							4.1				
27							4.1				
28							4.2				
29							4.2				
30							4.3				
31	↓						4.2				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From:

3/01/03

To:

3/31/03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						0				
2							0				
3							0				
4							0				
5							0.6				
6							0.9				
7							1.0				
8							1.0				
9							1.1				
10							1.1				
11							1.2				
12							1.1				
13							1.0				
14							0.9				
15							0.9				
16							0.9				
17							0.9				
18							0.8				
19							1.2				
20							1.3				
21							1.3				
22							1.3				
23							1.2				
24							1.1				
25							1.4				
26							2.0				
27							2.6				
28							3.1				
29							3.5				
30							3.9				
31	✓						3.9				

DAILY SAMPLE RESULTS - PART B

Permit Number: FL0029939

R001

Monitoring Period

From: 3/01/03

To: 3/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 67%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	7.4 ^{5.0}	6.9 ^{5.0}	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.560									
2	.490						7.0		1.2	0
3	.480						7.1		1.0	0
4	.440	15	332	9.0	396		7.3		1.6	0
5	.520						6.9	< 1	1.2	0
6	.480						7.0		1.8	0
7	.430						6.9		1.5	0
8	.520						7.2		1.9	0
9	.520						7.0		1.7	0
10	.470						7.2		2.0	0
11	.470	14j	284j	9.2	213		7.0		1.6	0
12	.460						7.3	1	2.2	0
13	.460						7.1		1.9	0
14	.580						7.0		2.2	0
15	.510						6.9		1.6	1.0
16	.480						7.2		0.5	0.1
17	.590						7.4		0.9	2.2
18	.650	6.9	218	6.4	246		7.2		1.8	0.5
19	.640						7.3	< 1	1.4	1.2
20	.570						7.1		1.9	0.1
21	.560						6.9		2.2	0.2
22	.620						7.2		1.4	0
23	.550						7.1		1.3	0
24	.540						7.2		1.4	0.5
25	.520	9.1	216	6.6	207		7.1		1.7	0.2
26	.510						7.3	< 1	2.1	0
27	.650						7.1		2.0	0
28	.580						7.2		2.2	1.1
29	.570						7.1		2.0	0
30	.590						7.0		2.1	0
31	.550						7.0		2.0	0.4
							6.9		2.2	0

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 3/01/03

To: 3/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 67%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1											
2											
3											
4	< 0.02	28.9	5.7								
5											
6											
7											
8											
9											
10											
11	< 0.02	32.8	4.9								
12											
13											
14											
15											
16											
17											
18	< 0.02	24.3	3.4								
19											
20											
21											
22											
23											
24											
25	0.08	33.7	4.1								
26											
27											
28											
29											
30											
31											

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number: FL0029939

Monitoring Period

From: 3/01/03

To: 3/31/03

Three-month Average Daily Flow:

(TMADF/Permitted Capacity)x100: 67%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.026		.026		0.2	0.2				
2			.102		.102		0.2	0.2				
3			.198		.178		0.3	0.1				
4			.384		.384	10	0.3	0				
5			.418		.418		0.3	0				
6			.182	.134	.048		0.4	0				
7							0.4	0				
8							0.4	0				
9							0.3	0				
10			.340	.178	.162		0.5	0				
11			.415	.212	.203	1.6	0.8	0				
12			.310	.203	.107		1.0	0				
13			.387	.216	.171		1.3	0.1				
14			.516	.331	.185		1.6	0.3				
15			.433	.292	.141		2.0	0.6				
16			.343	.247	.096		2.3	0.6				
17			.563	.367	.196		2.6	0.7				
18			.515	.471	.044	4.0	2.9	0.8				
19			.347	.267	.080		3.2	1.0				
20			.215	.114	.101		3.3	0.9				
21			.327	.377			3.5	0.9				
22			.284	.284			3.4	1.4				
23			.391	.397			3.3	2.1				
24			.316	.316			3.2	2.7				
25			.264	.264		1.0	3.0	3.0				
26			.335	.335			3.0	3.2				
27			.324	.324			3.0	3.6				
28			.308	.308			2.9	3.9				
29			.248	.248			2.9	4.3				
30			.222		.222		2.9	4.7				
31	✓	✓	.232		.232		2.9	4.5				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

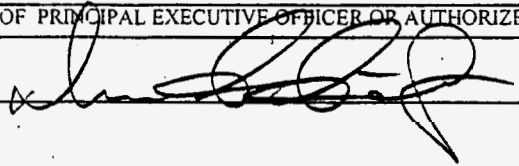
WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon.Site No. EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon.Site No. EFF-1	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon.Site No. EFF-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon.Site No. EFF-1	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
DEAN S. SMILEY JR. Asst. Supt.		(772) 597-3496	2003/05/28

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal-Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H 1 Mon.Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B 1 Mon.Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND			MG	0		
STORET No. 0005+6 1 Mon.Site No. EFF-2	Permit Measurement	Report (Total Month)	mg				Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement							
STORET No. 50060 1 Mon.Site No. EFF-2	Permit Measurement			0.01 (Max.)	mg/L		Daily during any overflow	Grab
pH	Sample Measurement							
STORET No. 00400 1 Mon.Site No. EFF-2	Permit Measurement			6.0 (Min.) 8.5 (Max.)	S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No. 00300 1 Mon.Site No. EFF-2	Permit Measurement			5.0 (Min.)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	N/D						%	0		
PARM Code TAN-6H Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND				NG	0	
STORET No. 00056 1 Mon.Site No. EFF-3	Permit Measurement	Report (Total Month)	mg				Continuous during any overflow	Calculated Flow
pH	Sample Measurement							
STORET No. 00400 1 Mon.Site No. EFF-3	Permit Measurement			6.0 (Min.) 8.5 (Max.)	S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement							
STORET No. 50060 1 Mon.Site No. EFF-3	Permit Measurement			0.01 (Max.)	mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement							
STORET No. 00300 1 Mon.Site No. EFF-3	Permit Measurement			5.0 (Min.)	mg/L		Daily during any overflow	Grab
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon.Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/21/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	.350						MGD	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement		.518					MGD	0		
STORET No. 50050 I Mon. Site No. EFF-6	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.5			Mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement				4.1	8.3		Mg/L	0		
STORET No. 80082 I Mon. Site No. EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				5.3			Mg/L	0		
STORET No. 00530 Y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				5.2	9.4		Mg/L	0		
STORET No. 00530 I Mon. Site No. EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement				6.8 S.U.	7.5 S.U.		S.U.	0		
STORET No. 00400 I Mon. Site No. EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.04			Mg/L	0		
STORET No. 00620 1 Mon. Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			3.8	2.2		Mg/L	0		
STORET No. 00600 1 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			4.4	2.2		Mg/L	0		
STORET No. 00665 1 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			5.1			#/100 mL	0		
STORET No. 74055 Y Mon. Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100 mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			< 1	< 1		#/100 mL	0		
STORET No. 74055 1 Mon. Site No. EFF-6	Permit Measurement			Report (Mo. Geo. Mean)	800 (Max.)		#/100 mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.2			Mg/L	0		
STORET No. 50060 1 Mon. Site No. EFF-6	Permit Measurement			0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 4/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon.Site No. EFF-4	Permit Measurement	Report (Total Month.)	Report (Max. Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon.Site No. EFF-5	Permit Measurement	Report (Total Month.)	Report (Max. Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.288					MGD	0		
STORET No. 50050 Mon.Site No. EFF-7	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	0.080						MGD	0		
STORET No. 50050 Mon.Site No. EFF-8	Permit Measurement	0.107 (An. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.139					MGD	0		
STORET No. 50050 Mon.Site No. EFF-8	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.096						MGD	0		
STORET No. 50050 Mon.Site No. EFF-9	Permit Measurement	0.143 (An. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.149					MGD	0		
STORET No. 50050 Mon.Site No. EFF-9	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				3.04			Mg/L	0		
STORET No. 00530 Mon.Site No. EFF-6	Permit Measurement				10.0 (Mo. Avg.)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	-----

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER:	FL0029939
MONITORING PERIOD From:	<u>4/01/03</u>
LIMIT:	Fidal
CLASS SIZE:	Minor

To: 4/30/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.:

COUNTY: Martin

[illegible]

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 4/01/03

To: 4/30/03

Discharge y0

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Declorination) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						2.7				
2							2.7				
3							2.8				
4							2.9				
5							2.8				
6							2.8				
7							2.7				
8							2.6				
9							2.6				
10							2.6				
11							0.9	← PUMPED OUT FOR CLEANING			
12							0				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
20							0				
21							0				
22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0				
31							0				

PLANT STAFFING:

Day Shift Operator Class: A Certificate No: 6805 Name: DUAN S. SMILGY, JR.
 Evening Shift Operator Class: B Certificate No: 3634 Name: JOHN C. JOHANSEN, SR.
 Night Shift Operator Class: B Certificate No: 1747 Name: JAMES G. HIGWITT
 Lead Operator Class: B Certificate No: 9439 Name: RONALD WATSON
 Type of Effluent Disposal or Reclaimed Water Reuse: EVAP. / POISS. Ponds / IRRIGATION
 Limited Wet Weather Discharge Activated: Yes: No: (Not Applicable) If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 4/21/03

To: 4/30/03

Discharge yⁿ

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						4.3				
2							4.2				
3							4.3				
4							4.2				
5							4.1				
6							4.1				
7							4.0				
8							3.9				
9							4.1				
10							4.2				
11							3.3				
12							2.3				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
20							0				
21							0				
22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0				
31							0				

PUMPED FOR CLEANING

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 4/11/03

To: 4/30/03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Declorination) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						3.9				
2							3.8				
3							3.7				
4							3.7				
5							3.6				
6							3.4				
7							3.2				
8							3.0				
9							2.8				
10							2.8				
11							2.6				
12							2.4				
13							2.2				
14							2.0				
15							1.9				
16							1.8				
17							1.7				
18							1.6				
19							1.6				
20							1.6				
21							1.4				
22							1.4				
23							1.0				
24							0.4				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0				
31	↓						0				

PUMPED FOR CLEANING

DAILY SAMPLE RESULTS - PART B

Permit Number: FL0029939

R001

Monitoring Period

From:

4/21/03

To:

4/30/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

68%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	7.5 ^{su}	6.8 ^{su}	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	1.470	< 2.0	2.72	6.6	2.26		6.9	< 1	2.2	0
2	1.640						7.1		1.7	0
3	1.560						7.0		1.4	0
4	1.520						6.9		1.5	0
5	1.500						7.2		2.2	0
6	1.520						7.3		1.6	0
7	1.520						7.4		2.0	0
8	1.480	8.3	2.18	9.1	2.87		7.3	< 1	1.5	0
9	1.500						7.3		2.2	0
10	1.460						7.2		1.3	0
11	1.480						7.3		2.1	0
12	1.530						7.1		1.8	0
13	1.560						7.1		2.2	0
14	1.520						7.0		1.9	0
15	1.510	2.6	2.15	3.6	1.83		7.3	< 1	2.2	0
16	1.480						7.0		1.7	0
17	1.580						7.2		2.1	0
18	1.610						6.9		1.6	0
19	1.550						7.2		1.4	0
20	1.520						7.5		1.2	0
21	1.410						7.3		1.8	0
22	1.490	2.9	2.66	3.6	1.51		7.4	< 1	2.2	0
23	1.440						6.9		2.2	0
24	1.350						6.8		1.8	0
25	1.600						7.1		2.2	1.8
26	1.590						7.0		2.0	0.3
27	1.610						7.0		1.8	0.1
28	1.530						6.9		2.2	0.4
29	1.530	4.8	2.38	2.8	1.43		7.4	< 1	2.2	0
30	1.490						7.2		1.8	0.1
31										

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 4/01/03

To: 4/30/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 68%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1	0.02	31.0	2.8								
2											
3											
4											
5											
6											
7											
8	0.04	31.8	4.4								
9											
10											
11											
12											
13											
14											
15	0.04	16.1	1.1								
16											
17											
18											
19											
20											
21											
22	0.02	23.0	1.6								
23											
24											
25											
26											
27											
28											
29	0.04	19.1	4.2								
30											
31											

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 4/01/03

To: 4/30/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 68%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.227		.227	4.6	2.9	4.4				
2			.082		.082		2.8	4.2				
3			.291		.291		2.7	4.0				
4			.309		.309		2.6	3.9				
5			.367		.367		2.6	3.8				
6			.323		.323		2.5	3.7				
7			.194		.194		2.4	3.5				
8			.155		.155	2.8	2.3	3.4				
9			.115		.115		2.3	3.2				
10			.261		.261		2.3	3.1				
11			.361	.361			2.2	3.0				
12			.355	.355			2.3	3.1				
13			.398	.398			2.4	3.5				
14			.197	.197			2.5	3.7				
15			.214	.214		3.6	2.6	3.8				
16			.416	.186	.230		2.6	3.9				
17			.262	.149	.113		2.7	3.8				
18			.263	.058	.205		2.5	3.7				
19			.250	.070	.180		2.9	3.7				
20			.234	.051	.183		2.9	3.6				
21			.216	.026	.190		2.9	3.5				
22			.321	.167	.154	2.4	2.9	3.4				
23			.339	.216	.123		3.0	3.3				
24			.486	.238	.193		3.1	3.2				
25			.403	.582	.021		3.2	3.1				
26			.396	.175	.221		3.4	3.1				
27			.389	.331	.058		3.6	3.1				
28			.399	.293	.106		3.8	3.1				
29			.421	.244	.177	1.8	3.9	3.1				
30	↓	↓	OFF	OFF	OFF		3.9	3.0				
31												

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/6/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

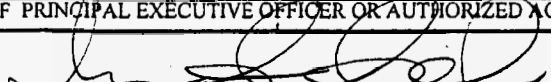
FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					N/C	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
DEAN S. SMILGY, JR. ASST. Supt.		(772) 597-3496	2003/06/27

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	6		
STORET No. 0005+6 Mon Site No. EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon Site No. EFF-2	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon Site No. EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon Site No. EFF-2	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	N/D						%	0		
PARM Code TAN-6H Mon Site No. EEF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EEF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☐

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min.)	8.5 (Max.)		SL		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/01/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	352						MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	(An. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement		509					MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.3			mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement				3.7		5.5	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				5.1			mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				2.7		4.0	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement				6.9	8.3		S.U.	0		
STORET No. 00400 Mon. Site No. EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.13			mg/L	0		
STORET No. 00620 Mon Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			16	11.4		mg/L	0		
STORET No. 00600 Mon Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			4.3	3.0		mg/L	0		
STORET No. 00665 Mon Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			4.9			#/100mL	0		
STORET No. 74055 Mon Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			<1	<1		#/100mL	0		
STORET No. 74055 Mon Site No. EFF-6	Permit Measurement			Report (Mo. Geo. Mean)	800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.5			mg/L	0		
STORET No. 50060 Mon Site No. EFF-6	Permit Measurement			0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/1/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		1204					MGD	0		
STORET No. 50050 Mon Site No. EFF-7	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	0.086						MGD	0		
STORET No. 50050 Mon Site No. EFF-8	Permit Measurement	Report (Ann. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		1083					MGD	0		
STORET No. 50050 Mon Site No. EFF-8	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.092						MGD	0		
STORET No. 50050 Mon Site No. EFF-9	Permit Measurement	Report (Ann. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		115					MGD	0		
STORET No. 50050 Mon Site No. EFF-9	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				2.0			mg/L	0		
STORET No. 00050 Mon Site No. EFF-6	Permit Measurement				Report (Mo. Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 5/1/03
LIMIT: Final
CLASS SIZE: Minor

To: 5/31/03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	260						Mg/L	0		
TSS	Sample Measurement	182						Mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03To: 5/31/03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						0				
2							0				
3							0				
4							0				
5							0				
6							0				
7							0				
8							0				
9							0				
10							0				
11							0				
12							0				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
20							0				
21							0				
22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0				
31	✓						0				

PLANT STAFFING:

Day Shift Operator

Class:

A

Certificate No:

6805

Name:

DEAN S. SMILEY, JR.

Evening Shift Operator

Class:

B

Certificate No:

3634

Name:

DON C. JOHNSON, SR.

Night Shift Operator

Class:

B

Certificate No:

6747

Name:

JAMES G. HEWITT

Lead Operator

Class:

B

Certificate No:

943

Name:

ERNE WATSON

Type of Effluent Disposal or Reclaimed Water Reuse:

EVAP. / PUMP. Ponds / TREATMENTLimited Wet Weather Discharge Activated: Yes: No: (Not Applicable) If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03

To: 5/31/03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						1.1	STARTED LOADING 4/30/03			
2							2.2				
3							3.1				
4							3.7				
5							4.3				
6							5.1				
7							5.2				
8							5.2				
9							5.2				
10							5.1				
11							5.1				
12							5.0				
13							4.9				
14							4.8				
15							4.6				
16							4.4				
17							4.3				
18							4.2				
19							4.0				
20							3.9				
21							3.8				
22							3.7				
23							3.6				
24							3.6				
25							3.6				
26							3.5				
27							3.5				
28							3.5				
29							3.6				
30							3.6				
31	✓						3.7				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03

To: 5/31/03

Discharge y/n ☐

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						0				
2							0				
3							0				
4							0				
5							0				
6							0				
7							0				
8							0				
9							0				
10							0				
11							0				
12							0				
13							0				
14							0				
15							0				
16							0				
17							0				
18							0				
19							0				
20							0				
21							0				
22							0				
23							0				
24							0				
25							0				
26							0				
27							0				
28							0				
29							0				
30							0	STARTED / CAPPING POND #3			
31	✓						0.6				

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03

To: 5/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
						8.3 ^{su}	6.9 ^{su}			
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.510						7.1		2.0	1.1
2	.550						7.5		2.2	0.1
3	.540						7.0		1.7	0
4	.510						7.4		2.0	0.
5	.490						6.9		1.6	0
6	.480	2.9	262	3.0	177		7.2	<1	2.1	0
7	.460						7.4		1.7	0
8	.500						7.2		2.0	0
9	.480						7.4		1.8	0
10	.550						7.0		1.9	0
11	.510						6.9		1.9	0
12	.480						7.2		1.5	0
13	.470	2.8	245	1.6	194		7.4	<1	2.6	0
14	.490						7.2		2.2	0
15	.470						7.1		1.7	0.1
16	.470						7.3		2.2	0
17	.560						7.1		1.8	0.4
18	.570						7.4		2.1	0
19	.470						8.3		2.2	0
20	.460						7.3		2.2	0
21	.460	3.4	268	2.0	155		7.0	<1	2.2	0
22	.500						7.2		1.7	0.2
23	.480						7.3		2.3	0.2
24	.480						7.3		2.2	0
25	.470						7.2		2.0	0
26	.520						7.2		2.2	1.0
27	.520	5.5	264	4.0	202		7.1	<1	1.8	2.4
28	.530						7.4		2.1	0.5
29	.620						7.2		1.7	0.9
30	.600						7.2		2.2	0
31	.570						7.1		2.0	0

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03

To: 5/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 69%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1											
2											
3											
4											
5											
6	0.13	5.9	2.5								
7											
8											
9											
10											
11											
12											
13	104	13	2.6								
14											
15											
16											
17											
18											
19											
20											
21	103	10.8	2.5								
22											
23											
24											
25											
26											
27	102	16	4.3								
28											
29											
30											
31											

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 5/01/03

To: 5/31/03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 69%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	0				3.8	3.0				
2			0				3.8	2.9				
3			0				3.7	2.8				
4			0				3.6	2.7				
5			0				3.5	2.7				
6			.052	.019	.033	1.4	3.4	2.6				
7			.293	.183	.110		3.6	2.6				
8			.268	.146	.122		3.4	2.7				
9			.169	.028	.141		3.3	2.8				
10			.107	.035	.072		3.2	2.8				
11			.115	.031	.084		3.1	2.8				
12			.388	.003	.385		3.0	2.7				
13			.390	.271	.119	2.2	2.9	2.9				
14			.398	.269	.129		2.8	3.1				
15			.404	.241	.163		2.8	3.4				
16			.374	.247	.127		2.7	3.8				
17			.400	.271	.129		2.9	3.9				
18			.406	0	.406		3.0	3.9				
19			.352	0	.352		3.4	3.5				
20			.374	0	.374		3.7	3.5				
21			.374	0	.374	1.8	3.7	3.6				
22			.398	.274	.124		3.6	3.7				
23			.375	.248	.127		3.7	3.8				
24			.032	.000	.032		3.7	3.9				
25			.009	.002	.007		3.6	3.8				
26			.051	.028	.023		3.6	3.7				
27			.118	.027	.091	2.6	3.7	3.6				
28			.478	.258	.022		3.7	3.6				
29			0	0	0		4.0	3.6				
30			0	0	0		4.0	3.5				
31	↓	↓	0	0	0		3.9	3.5				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	<u>NO</u>	<u>NO</u>					<u>mg</u>	<u>0</u>		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Don C Johnson I Co. B 3634	Don C. Johnson	772 597-3496	7-28-2003

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon. Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon. Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					mc	0		
STORET No. 0005-6 Mon. Site No. EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-2	Permit Measurement				0.01 (Max)			mg/l		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		S-U		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement				5.0 (Min)			mg/l		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND						g/g	0		
PARM Code TAN-6H Mon. Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon. Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
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	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					mg	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon. Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon. Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	394						MGD	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	585						MGD	0		
STORET No. 50050 I Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.8			mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement				3.7			mg/L	0		
STORET No. 80082 I Mon. Site No. EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				3.7			mg/L	0		
STORET No. 00530 Y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				4.9			mg/L	0		
STORET No. 00530 I Mon. Site No. EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement				7.3 & 8.4	8.4 & 8.4		5.4	0		
STORET No. 00400 I Mon. Site No. EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement				0.03			mg/L	0		
STORET No. 00620 1	Permit Measurement				12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement				17.2	13.9		mg/L	0		
STORET No. 00600 1	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement				2.29	1.9		mg/L	0		
STORET No. 00665 1	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement										
STORET No. 74055 Y	Permit Measurement				200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement				21	21		#/100 mL	0		
STORET No. 74055 1	Permit Measurement				Report (Mo. Geo. Mean)	800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement				1.1			mg/L	0		
STORET No. 50060 1	Permit Measurement				0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					mg	0		
STORET No. 00056-1 Mon. Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max. Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					mg	0		
STORET No. 00056-P Mon. Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max. Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		322					mg	0		
STORET No. 50050-Q Mon. Site No. EFF-7	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	108						MGD	0		
STORET No. 50050-Y Mon. Site No. EFF-8	Permit Measurement	0.107 (An. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		201					MGD	0		
STORET No. 50050-R Mon. Site No. EFF-8	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	107						MGD	0		
STORET No. 50050-S Mon. Site No. EFF-9	Permit Measurement	0.143 (An. Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		189					MGD	0		
STORET No. 50050-T Mon. Site No. EFF-9	Permit Measurement		Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				3.7			mg/L	0		
STORET No. 00530-1 Mon. Site No. EFF-6	Permit Measurement				10.0 (Mo. Avg.)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 6-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 6-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	254			mg/L	0		
TSS	Sample Measurement	208			mg/L	0		
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 6-1-03

To: 6-30-03

Discharge y/n 0

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Decoloration) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						0				
2							0				
3							0				
4							0				
5							0				
6							0				
7							0				
8							0				
9							0.1				
10							2.5				
11							2.8				
12							3.0				
13							3.2				
14							3.3				
15							3.4				
16							3.4				
17							3.4				
18							3.4				
19							3.3				
20							3.2				
21							3.0				
22							3.1				
23							3.4				
24							3.6				
25							3.7				
26							3.7				
27							3.7				
28							3.5				
29							3.4				
30	W						3.3				
31											

PLANT STAFFING:

Day Shift Operator Class: A Certificate No: 6805 Name: DEAN & SMILEY JR
 Evening Shift Operator Class: B Certificate No: 2634 Name: DAN C JOHNSON II
 Night Shift Operator Class: B Certificate No: 6747 Name: JAMES G HEWITT
 Lead Operator Class: B Certificate No: 9439 Name: ERNE E. WATSON

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes: No: Not Applicable

EVAP/ PERC POND/ IRRIGATION

If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:

FL0029939

Monitoring Period

From: 6-1-03

To: 6-30-03

Discharge y⁰⁰

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						3.7				
2							3.6				
3							3.5				
4							3.4				
5							3.5				
6							3.4				
7							3.6				
8							3.8				
9							3.6				
10							3.6				
11							3.6				
12							4.0				
13							4.4				
14							4.7				
15							4.7				
16							4.7				
17							4.8				
18							4.8				
19							4.6				
20							4.5				
21							4.5				
22							4.5				
23							4.9				
24							5.0				
25							5.0				
26							5.0				
27							5.1				
28							5.1				
29							4.9				
30	↓						4.8				
31											

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 6-1-03

To: 6-30-03

Discharge y/0

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						1.3				
2							2.0				
3							2.8				
4							3.7				
5							4.5				
6							4.6				
7							5.0				
8							4.7				
9							4.3				
10							4.0				
11							3.8				
12							3.7				
13							3.5				
14							3.7				
15							3.8				
16							4.1				
17							4.4				
18							4.7				
19							4.8				
20							4.7				
21							4.5				
22							4.5				
23							4.2				
24							3.9				
25							3.7				
26							3.6				
27							3.4				
28							3.4				
29							3.2				
30							3.0				
31											

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: 6-1-03To: 6-30-03Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

72%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
						8.4 5.4.	6.9 5.4.			
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.550						6.9		2.1	0
2	.500						7.1		1.7	0
3	.520	3.2	326	2.6	372		6.9	<1	2.2	0
4	.510						7.4		1.6	0
5	.560						7.0		2.0	0.1
6	.670						7.1		1.5	4.5
7	.780						7.1		1.6	0.1
8	.680						7.1		1.8	0.4
9	.740						7.2		1.1	0
10	.530	3.4	228	3.0	166		7.2	<1	2.2	0
11	.580						7.2		2.2	0.6
12	.600						7.1		2.0	0.4
13	.540						6.9		2.2	0
14	.560						7.2		2.0	0.1
15	.580						7.1		2.1	0.1
16	.520						7.0		2.2	0.4
17	.530	4.8	265	6.0	160		7.3	<1	1.9	0
18	.510						6.9		1.6	0.6
19	.560						7.2		2.2	0.8
20	.620						7.1		2.2	1.1
21	.690						7.3		1.7	0.4
22	.610						7.1		1.4	0.3
23	.610						7.0		1.6	0
24	.560	3.6	196	3.2	134		8.3	<1	2.2	0.3
25	.576						7.4		2.0	0
26	.570						7.6		2.0	0
27	.560						7.2		2.2	0.1
28	.600						8.2		2.0	0
29	.540						8.4		2.2	0
30	.590						7.5		1.9	0
31										

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number: FL0029939
Monitoring Period From: 6-1-03

To: 6-30-03

Three-month Average Daily Flow: 72%
(TMADF/Permitted Capacity)x100:

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1											
2											
3	4.02	10.8	1.29								
4											
5											
6											
7											
8											
9											
10	4.02	14.6	2.12								
11											
12											
13											
14											
15											
16											
17	4.02	17.2	2.39								
18											
19											
20											
21											
22											
23											
24	0.03	13.2	1.97								
25											
26											
27											
28											
29											
30											
31											

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 6-1-03

To: 6-30-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

72%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code								85327				
Mon. Site								EFF-5				
1	ND	ND					3.8	3.5				
2							3.7	3.4				
3						0	3.6	3.3				
4							3.5	3.2				
5			.300	.140	.160		3.4	3.2				
6							3.6	3.2				
7							3.7	3.7				
8							3.9	3.6				
9							3.8	3.5				
10						27	3.7	3.5				
11							3.6	3.4				
12							3.6	3.3				
13							3.5	3.2				
14							3.4	3.2				
15							3.3	3.1				
16							3.3	3.1				
17						0	3.3	3.0				
18							3.2	3.0				
19							3.2	2.9				
20							3.1	2.9				
21							3.0	3.0				
22							3.0	3.0				
23							3.1	3.0				
24						4.2	3.2	3.0				
25			.460	.250	.210		3.2	3.6				
26			.408	.220	.188		3.2	3.4				
27			.400	.210	.190		4.5	3.2				
28			.389	.189	.200		4.4	3.1				
29			.409		.409		4.2	3.1				
30	✓	✓	.363		.363		4.2	2.9				
31												

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 7-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total) Monthly		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 90400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		SD		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Don C Johnson II Asst. Supt.	Don C Johnson II	772 597-3496	8-26-03

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939-003-DW1
MONITORING PERIOD From: _____
LIMIT: Final
CLASS SIZE: Minor

To: _____
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi PARM Code TAN-6H Mon.Site No. EFF-1	Sample Measurement	ND	ND					%	0		
	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia PARM Code TAN-3B Mon.Site No. EFF-1	Sample Measurement										
	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939-003-DW1
MONITORING PERIOD From: 7-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	NA	NA					MG	0		
STORET No. 0005+6 Mon. Site No. EFF-2	Permit Measurement	Report (Total Month)	Report (Daily Flow)	mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-2	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00406 Mon. Site No. EFF-2	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939-003-DW1

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	1D	ND					%	0		
PARM Code TAN-6H Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 7/1/03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
STORET No. 00056 Mon. Site No. EFF-3	Sample Measurement	12	12				mg	0		
	Permit Measurement	Report (Total Month)	mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement									
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement			6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement									
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement			0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement									
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement			5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939-003-DWI

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND						%	0		
PARM Code TAN-6H Mon.Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939-003-DW1
MONITORING PERIOD From: 7-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.326						MGD	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	0.526						MGD	0		
STORET No. 50050 I Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)		mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement				5.3			mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement				7.2		16	mg/L	0		
STORET No. 80082 I Mon. Site No. EFF-6	Permit Measurement				25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				5.3			mg/L	0		
STORET No. 00530 y Mon. Site No. EFF-6	Permit Measurement				20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement				7.2		13	mg/L	0		
STORET No. 00530 I Mon. Site No. EFF-6	Permit Measurement				30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement				6.5	8.6		S.U.	0		
STORET No. 00406 I Mon. Site No. EFF-6	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grub
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939-003-DW1

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.15			mg/L	0		
STORET No. 00602 I Mon.Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			24.1	19.2		mg/L	0		
STORET No. 00602 I Mon.Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			3.54	1		mg/L	0		
STORET No. 00620 I Mon.Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			4.9			#/100mL	0		
STORET No. 31615 Y Mon.Site No. EFF-6	Permit Measurement			200 (An.Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			1.3	3		#/100mL	0		
STORET No. 31615 L Mon.Site No. EFF-6	Permit Measurement			Report (Mo.Geo.Mean)	800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.0			mg/L	0		
STORET No. 50060 I Mon.Site No. EFF-6	Permit Measurement			0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939-003-DW1
MONITORING PERIOD From: 7-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon.Site No. EFF-4	Permit Measurement	Report (Total Month.)	Report (Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon.Site No. EFF-5	Permit Measurement	Report (Total Month.)	Report (Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.333					MGD	0		
STORET No. 50050 Mon.Site No. EFF-7	Permit Measurement		Report (Mo.Avg.)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	.110						MGD	0		
STORET No. 50050 Mon.Site No. EFF-8	Permit Measurement	0.107 (An.Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.236					MGD	0		
STORET No. 50050 Mon.Site No. EFF-8	Permit Measurement		Report (Mo.Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	.109						MGD	0		
STORET No. 50050 Mon.Site No. EFF-9	Permit Measurement	0.143 (An.Avg.)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.133					MGD	0		
STORET No. 50050 Mon.Site No. EFF-9	Permit Measurement		Report (Mo.Avg.)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				5.5			mg/L	0		
STORET No. 00530 Mon.Site No. EFF-6	Permit Measurement				10.0 (Mo.Avg.)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 7-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 7-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	224						mg/L	0		
TSS	Sample Measurement	149						mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Discharge y/m

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						2.9				
2							2.9				
3							2.6				
4							2.4				
5							2.3				
6							2.2				
7							2.2				
8							2.0				
9							2.0				
10							2.0				
11							1.9				
12							2.5				
13							2.5				
14							2.5				
15							2.6				
16							2.7				
17							2.9				
18							2.5				
19							2.3				
20							2.5				
21							2.7				
22							3.0				
23							2.6				
24							2.5				
25							2.5				
26							2.5				
27							2.8				
28							3.1				
29							2.8				
30							2.8				
31	✓						2.8				

PLANT STAFFING:

Day Shift Operator

Class: A

Certificate No:

6805

Name:

DEAN Smiley JR.

Evening Shift Operator

Class: B

Certificate No:

3634

Name:

DON C JOHNSON I

Night Shift Operator

Class: B

Certificate No:

6747

Name:

JAMES G HEWITT

Lead Operator

Class: B

Certificate No:

9439

Name:

ERNIE WATSON

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes No: Not Applicable If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						4.5				
2							4.5				
3							4.0				
4							3.8				
5							3.6				
6							3.5				
7							3.5				
8							3.6				
9							3.6				
10							3.6				
11							3.5				
12							4.1				
13							4.1				
14							4.1				
15							4.1				
16							4.2				
17							4.4				
18							4.2				
19							4.8				
20							4.7				
21							4.6				
22							4.3				
23							4.2				
24							4.1				
25							4.1				
26							4.0				
27							4.3				
28							4.6				
29							4.4				
30							4.3				
31	✓						4.4				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						3.1				
2							3.1				
3							3.4				
4							3.2				
5							2.9				
6							2.7				
7							2.5				
8							2.4				
9							2.6				
10							2.4				
11							2.2				
12							2.3				
13							2.4				
14							2.5				
15							2.6				
16							3.0				
17							3.3				
18							3.5				
19							4.1				
20							3.9				
21							3.5				
22							3.5				
23							3.7				
24							3.7				
25							3.7				
26							3.6				
27							4.2				
28							4.0				
29							4.1				
30							4.1				
31	✓						4.1				

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

74%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
						5.4 8.6	8.4 6.5			
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTII-1
1	.450	3.7	232	6.2	152		7.0	21	2.2	0.3
2	.540						7.3		2.2	0.4
3	.530						7.1		1.7	0.0
4	.550						7.1		1.8	0.0
5	.580						7.2		1.7	0.1
6	.520						7.2		1.6	0.0
7	.540						6.5		2.2	0.0
8	.520	3.2	214	2.8	119		6.7	3	2.2	0.3
9	.540						7.0		2.2	0.0
10	.550						7.5		2.2	0.7
11	.520						8.6		2.2	0.0
12	.560						8.1		2.2	0.0
13	.560						7.3		2.2	0.1
14	.530						7.2		2.2	0.1
15	.530	4.6	221	5.1	188		7.1	21	2.2	0.0
16	.590						7.1		2.2	0.5
17	.600						6.9		2.2	0.0
18	.570						7.1		2.2	0.0
19	.710						7.1		2.0	1.5
20	.690						7.0		2.1	0.0
21	.590						6.9		1.8	0.0
22	.590	16	226	13	124		7.4	2	2.2	0.0
23	.610						7.6		2.1	0.6
24	.560						6.9		1.0	0.1
25	.560						7.1		1.0	0.0
26	.560						7.0		1.0	0.2
27	.610						7.1		1.5	0.7
28	.600						7.2		1.5	0.1
29	.680	68	227	9.2	165		7.0	21	2.2	0.0
30	.640						7.6		2.2	0.1
31	.570						7.1		2.2	0.1

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

74%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P										
Code	00620	00600	00665										
Mon. Site	EFF-6	EFF-6	EFF-6										
1	0.03	9.87	1.06										
2													
3													
4													
5													
6													
7													
8	0.15	14.7	1.24										
9													
10													
11													
12													
13													
14													
15	0.02	23.4	1.99										
16													
17													
18													
19													
20													
21													
22	0.024	24.1	3.54										
23													
24													
25													
26													
27													
28													
29	0.03	24.1	2.07										
30													
31													

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 7-1-03

To: 7-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

17.10

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.416		.416	5.2	4.0	2.9				
2			.419	.200	.219		3.8	3.8				
3			.350	.280	.070		3.7	3.2				
4			.393	.256	.137		3.6	3.5				
5			.381	.280	.101		3.5	3.9				
6			.368	.255	.143		3.5	4.3				
7			.397	.254	.143		3.4	4.6				
8			.374	.231	.143	2.2	3.4	4.7				
9			.388	.245	.143		3.4	4.9				
10			.338	.195	.143		3.8	4.8				
11			.050	0	.050		3.9	4.7				
12			0				3.7	4.3				
13			0				3.7	4.3				
14			0				3.7	4.3				
15			.082	0	.082	5.6	3.7	4.3				
16			0				3.6	4.2				
17			0				3.6	4.2				
18			0				3.5	4.2				
19			0				3.5	4.2				
20			0				3.5	4.0				
21			0				3.5	4.0				
22			0				3.4	3.9				
23			.202	.092	.110		3.8	3.8				
24			.417	.274	.143		3.8	4.1				
25			.384	.244	.143		4.2	4.4				
26			.109		.109		3.7	4.5				
27			0				3.6	4.4				
28			.387	.244	.143		3.6	4.3				
29			.424	.258	.166	9.0	3.9	4.2				
30			.387	.204	.183		4.2	4.2				
31	↓	↓	.405	.215	.190		4.2	4.2				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 8-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 8-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Monthly)		mg						Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Don C. Johnson I Asst. Supt	Don C. Johnson I	712. 597-3496	9-26-03

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: _____
LIMIT: Final
CLASS SIZE: Minor

To: _____
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☐

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code: TAN-6H Mon Site No: EFF-1	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code: TAN-3B Mon Site No: EFF-1	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: _____
LIMIT: Final
CLASS SIZE: Minor

To: _____
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☐

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement										
STORET No. 0005-6 Mon. Site No. EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-2	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	112	112								
PARM Code TAN-6H Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 8-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 8-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

NO DISCHARGE FROM SITE ☐

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
							mg	0		
STORET No. 00056 Mon. Site No. EFF-3	1	Permit Measurement	Report (Total Month)	mg					Continuous during any overflow	Calculated Flow
pH		Sample Measurement								
STORET No. 00400 Mon. Site No. EFF-3	1	Permit Measurement		6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination		Sample Measurement								
STORET No. 50060 Mon. Site No. EFF-3	1	Permit Measurement		0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)		Sample Measurement								
STORET No. 00300 Mon. Site No. EFF-3	1	Permit Measurement		5.0 (Min.)			mg/L		Daily during any overflow	Grab
		Sample Measurement								
		Permit Measurement								
		Sample Measurement								
		Permit Measurement								
		Sample Measurement								
		Permit Measurement								
		Sample Measurement								
		Permit Measurement								
		Sample Measurement								
		Permit Measurement								
		Sample Measurement								

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

*Complete details sent to Mr. William Thiel
5 IN the D.E.P. P.S.L. Office*

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement							0/0	1		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Complete Details send to Mr. William Thier
of the P.S.L D.E.P. Office

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 8-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 8-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	<u>.325</u>			mgd	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.47 (An. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	<u>.883</u>			mgd	0		
STORET No. 50050 I Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			<u>5.9</u>	mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement	20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			<u>14.3</u>	mg/L	0		
STORET No. 80082 I Mon. Site No. EFF-6	Permit Measurement	25.0 (Mo. Avg.)		40.0/report (Week. Avg.)	60.0 (Max.)		Weekly	8-hour FPC
TSS	Sample Measurement			<u>6.0</u>	mg/L	0		
STORET No. 00530 Y Mon. Site No. EFF-6	Permit Measurement	20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			<u>14</u>	mg/L	0		
STORET No. 00530 I Mon. Site No. EFF-6	Permit Measurement	30.0 (Mo. Avg.)		45.0/report (Week. Avg.)	60.0 (Max.)		Weekly	8-hour FPC
pH	Sample Measurement			<u>6.7</u>	S.U.	0		
STORET No. 00400 I Mon. Site No. EFF-6	Permit Measurement	6.0 (Min.)		8.5 (Max.)	S.U.		6 Days/week	Grab
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement				0.05			mg/L	0		
STORET No. 00620 1 Mon. Site No. EFF-6	Permit Measurement				12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement				18.7	18		mg/L	0		
STORET No. 00600 1 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement				3.09	2.2		mg/L	0		
STORET No. 00665 1 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement				8.0			#/100mL	0		
STORET No. 74055 Y Mon. Site No. EFF-6	Permit Measurement				200 (Ar. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement				9	15		#/100mL	0		
STORET No. 74055 1 Mon. Site No. EFF-6	Permit Measurement				Report (Mo. Geo. Mean)	800 (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement				1.0			mg/L	0		
STORET No. 50060 1 Mon. Site No. EFF-6	Permit Measurement				0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 8-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 8-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-P Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		.395					MGD	0		
STORET No. 50050-O Mon Site No. EFF-7	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Recording flow meters and totalizer
Flow	Sample Measurement	.130						MGD	0		
STORET No. 50050-Y Mon Site No. EFF-8	Permit Measurement	0.107 (An Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.315					MGD	0		
STORET No. 50050-R Mon Site No. EFF-8	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	.124						MGD	0		
STORET No. 50050-S Mon Site No. EFF-9	Permit Measurement	0.143 (An Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.395					MGD	0		
STORET No. 50050-T Mon Site No. EFF-9	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				14			mg/L	0		
STORET No. 00530-J Mon Site No. EFF-10	Permit Measurement				10.0 (Mo Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here);

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 8-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 8-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: —

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	143						mg/L	0		
TSS	Sample Measurement	106						mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Discharge ym

Permit Number:
Monitoring Period

FL0029939
From: 8-1-03

To: 8-31-03

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Decolorination) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	NA						2.7				
2							2.7				
3							2.9				
4							3.2				
5							3.4				
6							3.3				
7							3.6				
8							3.6				
9							3.4				
10							3.2				
11							3.4				
12							3.6				
13							3.7				
14							3.9				
15							4.0				
16							4.7				
17							3.0				
18							2.7				
19							2.8				
20							2.4				
21							3.1				
22							3.1				
23							3.5				
24							3.5				
25							4.3				
26							3.9				
27							4.4				
28							4.3				
29							4.4				
30							3.8				
31							3.7				

PLANT STAFFING:

Day Shift Operator Class: B Certificate No: 3634 Name: DON C. JOHNSON I
 Evening Shift Operator Class: B Certificate No: 9439 Name: ERNEST WATSON
 Night Shift Operator Class: B Certificate No: 6747 Name: JAMES G HEWITT
 Lead Operator Class: _____ Certificate No: _____ Name: _____

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes: No: Not Applicable If yes, cumulative days of wet weather _____

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 8-1-03

To: 8-31-03

Discharge yes

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND										
2							4.2				
3							3.9				
4							4.6				
5							4.7				
6							4.9				
7							4.9				
8							5.0				
9							5.0				
10							4.8				
11							4.9				
12							4.9				
13							5.0				
14							5.1				
15							5.1				
16							5.1				
17							5.0				
18							4.7				
19							4.4				
20							3.9				
21							3.8				
22							4.1				
23							4.6				
24							4.9				
25							4.9				
26							5.1				
27							5.1				
28							5.1				
29							5.1				
30							5.2				
31	W						5.2				
							5.2				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:

FL0029939

Monitoring Period

From: 8-1-03

To: 8-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1											
2							4.1				
3							4.2				
4							4.5				
5							4.8				
6							4.8				
7							4.7				
8							4.8				
9							4.8				
10							4.7				
11							4.8				
12							4.9				
13							4.9				
14							4.9				
15							5.1				
16							5.1				
17							4.3				
18							3.3				
19							3.7				
20							3.6				
21							4.2				
22							4.1				
23							3.9				
24							3.7				
25							4.8				
26							4.7				
27							4.5				
28							4.4				
29							4.3				
30							4.3				
31							4.0				
							3.9				

Discharged on 8-15-03 - from EFF-3
 Complete report sent to Mr. William Theil of the
 P. L. D. E. P. Office

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939
From: 8-1-03

To: 8-31-03

Three-month Average Daily Flow: 11700
(TMADF/Permitted Capacity)x100:

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max) 5.0 7.5	pH (Min) 6.1 6.7	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.660						6.9		2.2	0.5
2	.820						6.7		2.0	2.6
3	1.05						7.1		2.0	1.7
4	.860						7.1		1.9	0
5	.780	9.0	156	10	95		6.9	15	2.2	0
6	.920						7.0		2.2	0.5
7	.850						7.0		2.2	0
8	.670						7.0		2.0	0.2
9	.960						6.9		2.1	2.0
10	1.09						7.0		2.0	1.1
11	1.06						7.0		1.3	1.0
12	1.11	19	111	39	63		7.5	41	1.8	0.1
13	1.00						7.0		2.2	1.2
14	1.13						7.5		1.2	0.6
15	.990						6.9		2.0	0.2
16	.960						7.2		2.2	0.0
17	1.07						6.7		2.2	0.5
18	.920						7.0		1.5	0.1
19	1.10	7.2	117	5.6	71		7.0	7	2.0	0.2
20	.920						7.0		2.0	0
21	.850						7.1		1.7	0
22	.860						7.0		2.0	0
23	.780						7.1		1.3	0.1
24	.900						7.1		1.7	1.0
25	.760						6.7		1.2	0
26	.750	2.04	189	2.6	194		7.0	14	1.5	0
27	.720						7.0		1.0	0.3
28	.790						6.9		1.1	0.1
29	.690						6.9		1.0	0
30	.680						7.0		1.0	0.1
31	.680					✓	7.1		1.0	0.1

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939
From: 8-1-03

To: 8-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 117%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P									
Code	00620	00600	00665									
Mon. Site	EFF-6	EFF-6	EFF-6									
1												
2												
3												
4												
5	0.05	18	1.8									
6												
7												
8												
9												
10												
11												
12	0.04	18.7	3.09									
13												
14												
15												
16												
17												
18												
19	0.024	16.8	1.83									
20												
21												
22												
23												
24												
25												
26	0.05	18.5	3.07									
27												
28												
29												
30												
31												

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 8-1-03

To: 8-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 117%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	1.1	1.2	.405		.405		4.3	3.9				
2			0		0		4.3	4.0				
3			0		0		4.4	4.0				
4			.081		.081		4.4	4.1				
5			.478		.478	10	4.1	4.1				
6			.525	277	.248		4.7	4.0				
7			.524	.108	.416		4.7	4.3				
8			.528	.457	.071		4.6	4.3				
9			.554	.504	.050		4.7	4.9				
10			.565	.506	.059		5.0	4.0				
11			.560		.560		5.0	4.2				
12			.508		.508		5.0	4.5				
13			.541	.086	.455		5.0	4.7				
14			.126		.126		5.0	5.0				
15			.400		.400		5.1					
16			.518		.518		4.9	4.8				
17			.605		.605		4.9	5.0				
18			.585		.585		4.8	4.9				
19			.146		.146	6.4	4.8	4.8				
20			.275		.275		4.8	4.9				
21			.426		.426		4.7	4.8				
22			.411		.411		4.7	4.7				
23			.418		.418		4.7	4.7				
24			.011		.011		4.7	4.8				
25			.171		.171		4.7	4.8				
26			.583	354	.229	8.6	4.6	4.0				
27			.555	.005	.530		4.8	5.0				
28			.099		.099		4.7	5.0				
29			.105		.105		4.7	4.9				
30			.116		.116		4.7	4.6				
31	✓	✓	.643	.503	.100		4.7	4.6				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept 1 - 03
LIMIT: Final
CLASS SIZE: Miner

To: Sept 30 - 03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	Frequency of	Sample Type
Flow	Sample Measurement	<u>110</u>	<u>N/A</u>		<u>MG</u>		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Month)	mg			Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement						
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement		0.01 (Max)		mg/L	Daily during any overflow	Grab
pH	Sample Measurement						
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement		6.0 (Min)	8.5 (Max)	S.U.	Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement						
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement		5.0 (Min)		mg/L	Daily during any overflow	Grab
	Sample Measurement						
	Permit Measurement						
	Sample Measurement						
	Permit Measurement						

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
<u>DON C. JOHNSON I</u> <u>ASST. Supt.</u>	<u>Don C. Johnson I</u>	<u>772</u> <u>597-3496</u>	<u>10-23-03</u>

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept 1-03
LIMIT: Final
CLASS SIZE: Minor

To: Sept 30-03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☐

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal-Cyprinella leedsii	Sample Measurement	<u>NI</u>	<u>NI</u>					<u>%</u>	<u>0</u>		
PARM Code TAN-6H Mon Site No. EFF-1	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-1	Permit Requirement				LC50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept 1-02
LIMIT: Final
CLASS SIZE: Minor

To: Sept-02
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	<u>ND</u>	<u>ND</u>					<u>MG</u>	<u>0</u>		
STORET No: 0005+6 Mon Site No: EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No: 50060 Mon Site No: EFF-2	Permit Measurement				0.01 (Min)			mg/l		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No: 00400 Mon Site No: EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		5-10		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No: 00300 Mon Site No: EFF-2	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept-1-03
LIMIT: Final
CLASS SIZE: Minor

To: Sept-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	<u>N/A</u>	<u>N/A</u>								
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	N/A	N/A					%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept. 1, 02
LIMIT: Final
CLASS SIZE: Minor

To: Sept. 30, 02
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0316					mgd	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)	mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	.656					mgd	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)	mgd						Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			6.4			mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			10.1		13	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			6.2			mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)			mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			6.7		10	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement			6.5	7.5		S.U.	0		
STORET No. 00400 Mon. Site No. EFF-6	Permit Measurement			6.0 (Min.)	8.5 (Max.)		S.U.		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.0			mg/L	0		
STORET No. 00620 Mon. Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			28.2	18.3		mg/L	0		
STORET No. 00600 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			3.8	2.7		mg/L	0		
STORET No. 00665 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			9.0			#/100mL	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			18	340		#/100mL	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement			Report (Mo. Geo. Mean)	Report (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.0			mg/L	0		
STORET No. 50060 Mon. Site No. EFF-6	Permit Measurement			0.5 (Min)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept. 1, 03
LIMIT: Final
CLASS SIZE: Minor

To: Sept. 30, 03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: —

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-P Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		.322					MGD	0		
STORET No. 50050-O Mon Site No. EFF-7	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Recording flowmeters and totalizer
Flow	Sample Measurement	0.160						MGD	0		
STORET No. 50050-Y Mon Site No. EFF-8	Permit Measurement	0.107 (Am Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.395					MGD	0		
STORET No. 50050-R Mon Site No. EFF-8	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.143						MGD	0		
STORET No. 50050-S Mon Site No. EFF-9	Permit Measurement	0.143 (Am Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.311					MGD	0		
STORET No. 50050-T Mon Site No. EFF-9	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				10.0			mg/L	0		
STORET No. 00530-J Mon Site No. EFF-6	Permit Measurement				10.0 (Mo Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: Sept 1-03
LIMIT: Final
CLASS SIZE: Minor

To: Sept 30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	249						mg/L	0		
TSS	Sample Measurement	238						mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: Sept 1, 03

To: Sept 30, 03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorination) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						4.2				
2							4.3				
3							4.0				
4							3.9				
5							3.7				
6							3.6				
7							3.4				
8							3.3				
9							3.1				
10							3.0				
11							2.8				
12							3.1				
13							3.3				
14							3.4				
15							3.7				
16							3.7				
17							4.2				
18							3.9				
19							3.4				
20							3.1				
21							2.8				
22							2.5				
23							2.3				
24							1.9				
25							1.2				
26							2.9				
27							3.9				
28							3.8				
29							5.0				
30							4.8				
31	✓										

PLANT STAFFING:

Day Shift Operator

Class:

B

Certificate No:

3634

Name:

Don C Johnson Jr

Evening Shift Operator

Class:

B

Certificate No:

5439

Name:

Ernie E. Whitson

Night Shift Operator

Class:

B

Certificate No:

6747

Name:

James G. Howell

Lead Operator

Class:

B

Certificate No:

6747

Name:

James G. Howell

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes No Not Applicable If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: Sept 1-02

To: Sept 10-02

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	ND						5.1				
2							5.1				
3							5.2				
4							5.2				
5							5.2				
6							5.2				
7							5.2				
8							5.2				
9							5.2				
10							5.2				
11							5.2				
12							5.2				
13							5.2				
14							5.2				
15							5.2				
16							5.2				
17							5.2				
18							5.2				
19							5.2				
20							5.2				
21							5.2				
22							5.2				
23							5.2				
24							5.1				
25							5.0				
26							5.0				
27							5.0				
28							4.9				
29							5.0				
30	✓						5.2				
31											

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: Sept 1-03

To: Sept 30-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	N/D						3.7				
2							3.8				
3							3.7				
4							3.6				
5							3.6				
6							3.4				
7							3.7				
8							4.6				
9							4.6				
10							4.4				
11							4.2				
12							4.0				
13							4.7				
14							5.0				
15							4.6				
16							4.6				
17							4.6				
18							4.2				
19							4.0				
20							3.8				
21							3.7				
22							3.6				
23							3.4				
24							3.3				
25							3.2				
26							3.1				
27							3.5				
28							4.8				
29							3.9				
30							4.5				
31											

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: Sept 1-03

To: Sept 30-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

70.4 %

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
						7.5				
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.750						7.0		1.9	0.3
2	.670	7.8	150	3.8	90		7.1	34	2.0	0.0
3	.710						7.3		2.0	0.0
4	.760						7.1		1.0	0.4
5	1.12						7.0		2.0	0.4
6	1.10						6.9		1.8	0.5
7	.750						6.8		1.9	0.1
8	.600						7.0		2.0	0.0
9	.540	11	321	12	302		7.5	53	2.0	0.0
10	.590						7.3		2.0	0.2
11	.600						7.0		2.0	1.2
12	.510						7.0		2.0	0.0
13	.610						7.0		1.9	0.0
14	.620						7.1		2.0	0.0
15	.530						6.5		2.2	0.0
16	.600	11	222	2.4	2089		7.3	340	2.2	0.1
17	.540						6.7		2.2	0.0
18	.550						7.0		2.0	0.0
19	.540						7.3		2.2	0.0
20	.550						7.0		1.5	0.3
21	.550						7.0		2.2	0.0
22	.520						7.1		2.0	0.0
23	.520	13	255	10	234		7.3	32	2.0	0.0
24	.500						7.2		2.0	0.0
25	.540						7.0		2.2	0.9
26	.610						7.0		2.2	0.4
27	.550						7.1		2.2	0.0
28	1.13						7.0		2.2	0.0
29	.846	8.1	299	5.4	354		7.2	3	2.0	3.0
30	.730						7.0		2.0	0.0
31						✓				

Q = Sample Held beyond Normal Holding time

Cont. R001

70.4 %

U. Palmer was a martyr for peace and dedication.

DAILY SAMPLE RESULTS - PART B

R002 and R003

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

70.4 %

Permit Number:
Monitoring Period

FL0029939

From: Sept 1-03

To: Sept -30-03

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	N/D	N/D	.108		.108		5.0	4.6				
2			.570		.570	4.6	5.0	4.6				
3			.570		.570		4.9	4.6				
4			.128		.128		4.8	4.5				
5			.461		.461		4.7	4.4				
6			.540		.540		4.6	4.3				
7			.121		.121		4.5	4.1				
8			.124		.124		4.6	4.2				
9			.201		.201		4.5	4.2				
10			.201		.201		4.4	4.1				
11			0		0		4.4	4.1				
12			.402		.402		4.3	4.0				
13			0		0		4.1	3.9				
14			0		0		4.0	3.8				
15			.429		.429		4.0	3.8				
16			.156	.156		8.79	4.5	3.9				
17			.600	.600			4.6	3.9				
18			0		0		4.5	4.8				
19			.608		.608		4.5	4.8				
20			.569		.569		4.3	4.6				
21			.419		.419		4.2	4.2				
22			.419		.419		4.2	4.2				
23			0		0		4.0	4.3				
24			.145		.145		4.0	4.2				
25			.111		.111		3.9	4.1				
26			.106		.106		3.9	4.1				
27			.106		.106		3.9	4.0				
28			0		0		4.0	3.9				
29			0		0		4.0	3.9				
30	✓	✓				4.8	4.2	3.0				
31												

Q Sample Held Beyond NORMAC Holding time

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blai: Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 10-1-03
LIMIT: Final
CLASS SIZE: Miner

To: 10-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	N/D					MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Monthly)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
C. JOHNSON I ASST. Supt W/WW	Don C Johnson I	772-597-3496	10-25-03

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 10-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 10-31-03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	ND	ND					90	0		
PARM Code: IAN-6H Mon Site No: EFF-6	Permit Requirement				1:50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code: IAN-3B Mon Site No: EFF-1	Permit Requirement				1:50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 10-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 10-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	<u>ND</u>	<u>ND</u>					<u>MG</u>	<u>0</u>		
STORET No: 0005-6 Mon Site No: EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No: 50060 Mon Site No: EFF-2	Permit Measurement				0.01 (Max)			mg/l		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No: 00400 Mon Site No: EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		SG		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No: 00300 Mon Site No: EFF-2	Permit Measurement				5.0 (Min)			mg/l		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	N/D	N/D					N/D	0		
PARM Code TAN-6H Mon Site No. EFF-2	Permit Requirement				LC-50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-2	Permit Requirement				LC-50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-93
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-93
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC-50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC-50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-93
LIMIT: Final
CLASS SIZE: Minor

To: 12-3-93
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	308			MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	0.4	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	627			MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement		mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			7.0	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			12.6	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			25.0 (Mo. Avg.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			6.8	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			9.3	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			30.0 (Mo. Avg.)	mg/L		Weekly	8-hour FPC
pH	Sample Measurement			6.5				
STORET No. 00400 Mon. Site No. EFF-6	Permit Measurement			6.0 (Min.)			6 Days/week	Grab
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.65			mg/L	0		
STORET No. 00620 Mon. Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			30			mg/L	0		
STORET No. 00600 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			4.13			mg/L	0		
STORET No. 00665 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			8.7			#/100mL	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			1.3			#/100mL	0		
STORET No. 74055 Mon. Site No. EFF-6	Permit Measurement			Report (Mid. Geo. Mean)	Report (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.3			mg/L	0		
STORET No. 500600 Mon. Site No. EFF-6	Permit Measurement			10.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 10-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 10-1-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: —

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Monthly)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 00056-P Mon Site No. EFF-5	Permit Measurement	Report (Total Monthly)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		.363					MGD	0		
STORET No. 50050-0 Mon Site No. EFF-7	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Recording flowmeters and totalizer
Flow	Sample Measurement	.173						MGD	0		
STORET No. 50050-4 Mon Site No. EFF-8	Permit Measurement	Report (Mo. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.268					MGD	0		
STORET No. 50050-R Mon Site No. EFF-8	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	.165						MGD	0		
STORET No. 50050-S Mon Site No. EFF-9	Permit Measurement	Report (Mo. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.269					MGD	0		
STORET No. 50050-T Mon Site No. EFF-9	Permit Measurement		Report (Mo. Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				6.7			MG/L	0		
STORET No. 00530-1 Mon Site No. EFF-6	Permit Measurement				10/0 (Mo. Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 10-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 10-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	242						mg/L	0		
TSS	Sample Measurement	175						mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 10-1-03

To: 10-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Decoloration) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	N/D						4.9				
2							4.7				
3							4.6				
4							4.5				
5							4.3				
6							4.2				
7							4.1				
8							3.8				
9							3.7				
10							4.2				
11							4.5				
12							4.5				
13							4.6				
14							4.3				
15							4.2				
16							3.9				
17							3.7				
18							3.9				
19							4.1				
20							4.4				
21							4.7				
22							4.5				
23							4.3				
24							4.1				
25							4.3				
26							3.7				
27							3.6				
28							3.6				
29							3.7				
30							3.8				
31	✓						4.0				

PLANT STAFFING:

Day Shift Operator

Class:

B

Certificate No:

3634

Name:

DON C Johnson

Evening Shift Operator

Class:

B

Certificate No:

6747

Name:

James G. Hewitt

Night Shift Operator

Class:

B

Certificate No:

9439

Name:

Ernie Watson

Lead Operator

Class:

B

Certificate No:

Name:

Type of Effluent Disposal or Reclaimed Water Reuse:

FVAP / Reclaimed Water / Irrigation

Limited Wet Weather Discharge Activated: Yes No

Not Applicable

If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 10-1-03

To: 10-31-03

Discharge y/m

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	N/D						5.2				
2							5.1				
3							5.1				
4							5.0				
5							5.0				
6							5.1				
7							5.1				
8							5.1				
9							5.1				
10							5.1				
11							5.2				
12							5.2				
13							5.2				
14							5.2				
15							5.2				
16							5.2				
17							5.2				
18							5.2				
19							5.2				
20							5.2				
21							5.2				
22							5.2				
23							5.2				
24							5.2				
25							5.2				
26							5.1				
27							5.0				
28							5.0				
29							5.1				
30							5.1				
31	↓						5.1				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:
Monitoring Period

FL0029939

From: 10-1-03

To: 10-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						5.1				
2							5.0				
3							4.7				
4							4.8				
5							4.3				
6							4.0				
7							3.7				
8							3.6				
9							3.4				
10							3.3				
11							2.8				
12							3.9				
13							4.7				
14							5.0				
15							4.8				
16							4.4				
17							4.0				
18							3.9				
19							3.8				
20							3.6				
21							3.3				
22							3.9				
23							4.3				
24							4.4				
25							4.7				
26							4.4				
27							4.1				
28							4.0				
29							3.9				
30							3.9				
31	↘						3.3				

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939
From: 10-1-03

To: 10-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 72 90

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max) 3.4 7.6	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.700						7.0		2.2	0.1
2	.630						7.0		2.0	0
3	.640						7.0		2.2	0
4	.640						7.0		2.0	0
5	.660						7.0		1.8	0
6	.610						7.6		2.2	0
7	.570						6.9		2.1	0
8	.550	9.5	222	5.8	212		7.3	2	2.2	0
9	.550						6.5		2.2	0
10	.530						7.0		2.0	0
11	.590						6.8		2.0	.2
12	.580						6.8		2.1	0
13	.500						6.8		2.2	0
14	.560	14	218	11	134		7.4	.5	2.2	.1
15	.582						7.3		2.2	0
16	.570						7.3		2.1	0
17	.600						7.1		2.2	0
18	.600						7.0		2.2	0
19	.560						7.1		2.1	0
20	.587						7.3		2.2	.2
21	.600	9.8	245	8.2	182		7.3	.5	2.2	0
22	.670						7.3		1.3	0
23	1.03						7.3		1.3	0
24	1.08						7.0		1.0	0
25	1.3						7.0		2.2	0
26	.540						7.0		2.2	0
27	.510						7.3		2.2	0
28	.410	17	284	12	175		7.3	2	2.2	.2
29	.580						7.2		2.1	0
30	.540						7.3		2.2	0
31	.500						7.3		2.0	0

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 10-1-03

To: 10-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

20%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P								
Code	00620	00600	00665								
Mon. Site	EFF-6	EFF-6	EFF-6								
1											
2											
3											
4											
5											
6											
7											
8	0.02	26.2	3.37								
9											
10											
11											
12											
13											
14	0.024	26.4	2.98								
15											
16											
17											
18											
19											
20											
21	0.05	25.3	2.82								
22											
23											
24											
25											
26											
27											
28	0.03	30.0	4.13								
29											
30											
31											

U = Parameter was analyzed But not detected

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 12-1-03

To: 12-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100: 77

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.233		233		4.2	3.9				
2			.552		552		4.1	3.9				
3			.504	.460	104		4.6	3.9				
4			.525		525		4.5	3.8				
5			.520		.520		4.7	3.8				
6			.530		.530		4.4	3.7				
7			.505		.505		4.3	3.6				
8			.400	.400	0	6	4.2	3.6				
9			0				4.1	4.1				
10			0				4.1	4.1				
11			0				3.9	3.9				
12			0				3.8	3.9				
13			.320	.170	.150		3.8	3.9				
14			.350	.142	.202	11	3.8	4.2				
15			.394		.394		3.7	4.3				
16			.380		.380		3.9	4.3				
17			0				4.1	4.2				
18			0				4.0	4.1				
19			0				3.9	4.0				
20			.244	.126	.118		3.9	3.9				
21			.314	.290	.024	6.8	4.1	4.0				
22			.377	.374	.025		4.5	3.9				
23			.430	.238	192		4.5	4.3				
24			.318		318		4.5	4.6				
25			.151		.151		4.3	4.5				
26			0				4.2	4.5				
27			0				4.1	4.4				
28			.116		.116	12	4.1	4.4				
29			.116		.116		4.0	4.3				
30			.283		.283		3.9	4.2				
31	V	V	.417		.417		3.9	4.1				

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11.1.03
LIMIT: Final
CLASS SIZE: Minor

To: 11.30.03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	IND	ND					MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
C. JOHNSON I ASST SUT W/WW	Don C Johnson I	772-597-3496	12-29-03

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 11-7-03
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal-Cyprinella leedsii	Sample Measurement	ND	ND					g/g	0		
PARM Code TAN-6H Mon Site No. EFF-6	Permit Requirement				1:50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-1	Permit Requirement				1:50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-1-93
LIMIT: Final
CLASS SIZE: Minor

To: 11-30-93
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	ND					MG	0		
STORET No. 000546 Mon. Site No. EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 500601 Mon. Site No. EFF-2	Permit Measurement				0.01 (Max)			mg/l		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement				5.0 (Min)			mg/l		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-01-03
LIMIT: Final
CLASS SIZE: Minor

To: 11-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	ND	N/D					MG	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min.)	8.5 (Max.)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max.)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min.)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	ND	ND					%	0		
PARM Code TAN-6H Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-01-03
LIMIT: Final
CLASS SIZE: Minor

To: 11-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No.	Frequency of	Sample Type
	Measurement	0.296			MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	0.552			MGD	0		
STORET No. 50050 Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			8.0	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			13	mg/L	0		
STORET No. 80082 Mon. Site No. EFF-6	Permit Measurement			25.0 (Mo. Avg.)	40.0/report (Week. Avg.)	60.0 (Max.)	Weekly	8-hour FPC
TSS	Sample Measurement			9.0	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
TSS	Sample Measurement			33	mg/L	0		
STORET No. 00530 Mon. Site No. EFF-6	Permit Measurement			30.0 (Mo. Avg.)	45.0/report (Week. Avg.)	60.0 (Max.)	Weekly	8-hour FPC
pH	Sample Measurement			7.0	7.5	5.4		
STORET No. 00400 Mon. Site No. EFF-6	Permit Measurement			6.0 (Min.)	8.5 (Max.)	S.U.	6 Days/week	Grab
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading	Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement			0.04			mg/L	0		
STORET No. 00620 1 Mon. Site No. EFF-6	Permit Measurement			12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement			31.2	28.6		mg/L	0		
STORET No. 00600 1 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement			3.76	3.6		mg/L	0		
STORET No. 00665 1 Mon. Site No. EFF-6	Permit Measurement			Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement			11.1			#/100mL	0		
STORET No. 74055 Y Mon. Site No. EFF-6	Permit Measurement			200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement			29	49		#/100mL	0		
STORET No. 74055 1 Mon. Site No. EFF-6	Permit Measurement			Report (Mo. Geo. Mean)	Report (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement			1.0			mg/L	0		
STORET No. 50060 1 Mon. Site No. EFF-6	Permit Measurement			0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									
	Sample Measurement									
	Permit Measurement									

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 11-30-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					MGD	0		
STORET No. 00056-1 Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	N/D	N/D					MGD	0		
STORET No. 00056-P Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		0.351					MGD	0		
STORET No. 50050-O Mon Site No. EFF-7	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Recording flowmeters and totalizer
Flow	Sample Measurement	0.198						MGD	0		
STORET No. 50050-Y Mon Site No. EFF-8	Permit Measurement	0.107 (An. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.304					MGD	0		
STORET No. 50050-R Mon Site No. EFF-8	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	0.189						MGD	0		
STORET No. 50050-S Mon Site No. EFF-9	Permit Measurement	0.143 (An. Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		0.297					MGD	0		
STORET No. 50050-T Mon Site No. EFF-9	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				33			mg/L	0		
STORET No. 00530 Mon Site No. EFF-6	Permit Measurement				10.0 (Mo Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 11-01-02
LIMIT: Final
CLASS SIZE: Minor

To: 11-30-02
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	263			mg/L	0		
TSS	Sample Measurement	242			mg/L	0		
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							
	Sample Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 11-01-03

To: 11-30-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	N	D					3.8				
2							3.7				
3							3.6				
4							3.4				
5							3.2				
6							3.2				
7							3.0				
8							2.8				
9							3.6				
10							4.2				
11							4.3				
12							4.4				
13							4.2				
14							3.9				
15							3.7				
16							3.6				
17							3.4				
18							3.0				
19							3.0				
20							2.9				
21							3.3				
22							3.6				
23							4.1				
24							4.2				
25							4.0				
26							4.0				
27							3.9				
28							3.7				
29							4.1				
30							4.1				
31	W										

PLANT STAFFING:

Day Shift Operator

Class: B

Certificate No: 3634

Name: Dan C Johnson Jr

Evening Shift Operator

Class: B

Certificate No: 6747

Name: James G. Hewitt

Night Shift Operator

Class: B

Certificate No: 9439

Name: Ernie Watson

Lead Operator

Class: B

Certificate No: 9439

Name: Ernie Watson

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes: No No: (Not Applicable) If yes, cumulative days of wet weather

*Attach additional sheets if necessary to list all certified operators.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:
Monitoring Period

FL0029939

From: 11-1-03

To: 11-30-03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	PLD						5.1				
2							5.1				
3							5.0				
4							4.9				
5							4.8				
6							4.8				
7							4.7				
8							4.6				
9							5.0				
10							5.1				
11							5.1				
12							5.1				
13							5.1				
14							5.1				
15							5.1				
16							5.1				
17							5.0				
18							4.8				
19							4.7				
20							4.6				
21							4.6				
22							4.8				
23							5.1				
24							5.1				
25							5.1				
26							5.1				
27							5.1				
28							5.1				
29							5.1				
30							5.1				
31	✓						5.1				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:

FL0029939

Monitoring Period

From: 11-1-03

To: 11-30-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	ND						3.5				
2							3.7				
3							4.0				
4							4.2				
5							4.4				
6							4.6				
7							4.4				
8							4.1				
9							3.9				
10							3.8				
11							3.5				
12							3.4				
13							3.2				
14							3.2				
15							3.0				
16							2.8				
17							2.6				
18							3.2				
19							4.2				
20							4.3				
21							4.0				
22							3.8				
23							3.6				
24							3.4				
25							3.3				
26							3.1				
27							3.0				
28							2.9				
29							2.7				
30							3.6				
31	V										

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939
From: 11-1-03

To: 11-30-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

6196

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
						7.5 S.4.	S.4. 7.0			
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.600						7.0		2.1	0.1
2	.570						7.1		2.2	1.1
3	.570						7.3		1.0	0.1
4	.570	10	219	9.6	121		7.2	3	1.9	0.3
5	.580						7.1		1.7	0.4
6	.590						7.5		2.2	0.1
7	.580						7.3		1.5	0.0
8	.580						7.0		2.0	0.0
9	.620						7.3		1.8	0.2
10	.560						7.2		2.2	0.1
11	.570						7.1		2.0	0.1
12	.550	17	301	10	376		7.4	35	0.2	0.0
13	.560						7.3		1.0	0.0
14	.530						7.4		1.0	0.0
15	.620						7.4		1.0	0.0
16	.550						7.4		1.0	0.0
17	.520						7.2		1.0	0.0
18	.510	12	226	106	120		7.0	20	2.1	0.1
19	.550						7.0		2.0	1.1
20	.610						7.2		2.1	0.0
21	.440						7.0		2.0	0.0
22	.540						7.2		2.0	0.0
23	.560						7.2		1.9	0.0
24	.490						7.1		2.0	0.0
25	.540	14	304	7.8	348		7.0	49	2.1	0.0
26	.480						7.0		1.6	0.0
27	.550						7.0		2.0	0.0
28	.510						7.1		1.8	0.0
29	.540						7.0		1.6	0.0
30	.520						7.0		1.8	0.0
31										

DAILY SAMPLE RESULTS - PART B

Cont. R001

Permit Number:
Monitoring Period

FL0029939

From: 11-1-03

To: 11-30-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

619/3

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P										
Code	00620	00600	00665										
Mon. Site	EFF-6	EFF-6	EFF-6										
1													
2													
3													
4	0.02	29.0	3.76										
5													
6													
7													
8													
9													
10													
11													
12	0.04	28.2	3.73										
13													
14													
15													
16													
17													
18	0.04	26.0	3.15										
19													
20													
21													
22													
23													
24													
25	0.03	31.2	3.64										
26													
27													
28													
29													
30													
31													

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 11-1-03

To: 11-30-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

61%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	ND	ND	.377		.377		3.9	3.9				
2			.395		.395		3.6	3.8				
3			.380		.380		3.7	3.9				
4			.361		.361	8.0	3.6	3.8				
5			.373		.373		3.4	3.8				
6			.380		.380		3.6	3.8				
7			.405	205	200		3.6	4.1				
8			0				3.6	4.0				
9			.0				3.5	3.9				
10			.352	247	105		3.5	3.9				
11			.373		.373		3.4	3.9				
12			.416		.416	10	3.3	3.9				
13			.414	.315	.099		3.9	3.8				
14			.390	.390	.		4.4	3.8				
15			.407	.341	.066		4.3	4.2				
16			0				4.7	4.1				
17			0				4.6	4.1				
18			0			N/A	3.8	4.5				
19			.394	394			3.7	4.4				
20			.047	.047			4.5	4.4				
21			0				4.3	4.2				
22			0				4.2	4.2				
23			0				4.1	4.2				
24			.369	369			4.0	4.0				
25			.371	371		7.4	4.5	3.9				
26			.110		.110		4.5	4.3				
27			0				4.3	4.2				
28			0				4.2	4.1				
29			0				4.1	4.0				
30			0				4.0	3.9				
31	✓	✓										

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					MG	0		
STORET No. 00056 Mon. Site No. EFF-1	Permit Measurement	Report (Total Monthly)		mg						Continuous during any overflow	Calculated flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-1	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-1	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-1	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
Don Johnson I ASST Supt W/WW	Don C Johnson I	772-597-3496	1-27

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-02
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-02
REPORT: Toxicity
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No.	Frequency of Analysis	Sample Type
96-hr Acute Static Renewal- Cyprinella leedsi	Sample Measurement	N/A	N/A					%	0		
PARM Code TAN-6H Mon Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
96-hr Acute Static Renewal- Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon Site No. EFF-1	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24 hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D002
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					MG	0		
STORET No. 0005+6 Mon. Site No. EFF-2	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-2	Permit Measurement				0.01 (Max)			mg/l		Daily during any overflow	Grab
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-2	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-2	Permit Measurement				5.0 (Min)			mg/l		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Version 3/23/99

DISCHARGE MONITORING REPORT - PART A (Continued)
TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D002

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsi	Sample Measurement	N/D	N/D					0/0	0		
PARM Code IAN-6H Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code IAN-3B Mon.Site No. EFF-2	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Facilities Management Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: D003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

NO DISCHARGE FROM SITE ☒

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					mg	0		
STORET No. 00056 Mon. Site No. EFF-3	Permit Measurement	Report (Total Month)		mg						Continuous during any overflow	Calculated Flow
pH	Sample Measurement										
STORET No. 00400 Mon. Site No. EFF-3	Permit Measurement				6.0 (Min)	8.5 (Max)		S.U.		Daily during any overflow	grab
TRC for dechlorination	Sample Measurement										
STORET No. 50060 Mon. Site No. EFF-3	Permit Measurement				0.01 (Max)			mg/L		Daily during any overflow	Grab
Oxygen, Dissolved (DO)	Sample Measurement										
STORET No. 00300 Mon. Site No. EFF-3	Permit Measurement				5.0 (Min)			mg/L		Daily during any overflow	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

TOXICITY DMR

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: D003

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
96-hr Acute Static-Cyprinella leedsii	Sample Measurement	N/D	N/D					%	0		
PARM Code TAN-6H Mon. Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
96-hr Acute Static Renewal-Ceriodaphnia Dubia	Sample Measurement										
PARM Code TAN-3B Mon. Site No. EFF-3	Permit Requirement				LC 50 greater than 100%			% effluent		annual	four grab samples during a 24-hour day
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
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	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R001
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552

COUNTY: Martin

Parameter		Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	0.293			MGD	0		
STORET No. 50050 Y Mon. Site No. EFF-6	Permit Measurement	0.4 (An. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
Flow	Sample Measurement	0.534			MGD	0		
STORET No. 50050 1 Mon. Site No. EFF-6	Permit Measurement	Report (Mo. Avg.)	mgd				Continuous with 6 readings/week	Flow Meters with Totalizer
CBOD5	Sample Measurement			8.0	mg/L	0		
STORET No. 80082 Y Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)	mg/L		Weekly	8-hour FPC
CBOD5	Sample Measurement			9.6	mg/L	0		
STORET No. 80082 1 Mon. Site No. EFF-6	Permit Measurement			25.0 (Mo. Avg.)	40.0/report (Week Avg.)	60.0 (Max.)	Weekly	8-hour FPC
TSS	Sample Measurement			9.0	mg/L	0		
STORET No. 00530 Y Mon. Site No. EFF-6	Permit Measurement			20.0 (An. Avg.)			Weekly	8-hour FPC
TSS	Sample Measurement			7.9	mg/L	0		
STORET No. 00530 1 Mon. Site No. EFF-6	Permit Measurement			30.0 (Mo. Avg.)	45.0/report (Week Avg.)	60.0 (Max.)	Weekly	8-hour FPC
pH	Sample Measurement			7.0	7.6	8.4		
STORET No. 00400 1 Mon. Site No. EFF-6	Permit Measurement			6.0 (Min.)	8.5 (Max.)	S.U.	6 Days/week	Grab
	Sample Measurement							
	Permit Measurement							

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY NAME: Indiantown Company Wastewater Treatment Plant

PERMIT NUMBER: FL0029939

DISCHARGE POINT NUMBER: R001

WAFR SITE No.: 20552

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrate, as N	Sample Measurement				0.03			mg/L	0		
STORET No. 00620 1 Mon. Site No. EFF-6	Permit Measurement				12.0 (Max.)			mg/L		Weekly	Grab
Nitrogen, Total as N	Sample Measurement				36.	32.		mg/L	0		
STORET No. 00600 1 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Phosphorus, Total as P	Sample Measurement				4.4	3.6		mg/L	0		
STORET No. 00665 1 Mon. Site No. EFF-6	Permit Measurement				Report (Max.)	Report (Avg.)		mg/L		Weekly	8-hour FPC
Fecal Coliform Bacteria	Sample Measurement				12			#/100mL			
STORET No. 74055 N Mon. Site No. EFF-6	Permit Measurement				200 (An. Avg.)			#/100mL		Weekly	Grab
Fecal Coliform Bacteria	Sample Measurement				9	32		#/100mL	0		
STORET No. 74055 N Mon. Site No. EFF-6	Permit Measurement				Report (Mo. Geo. Mean)	Report (Max.)		#/100mL		Weekly	Grab
TRC for disinfection	Sample Measurement				1.3			mg/L	0		
STORET No. 50060 1 Mon. Site No. EFF-6	Permit Measurement				0.5 (Min.)			mg/L		6 Days/week	Grab
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										
	Sample Measurement										
	Permit Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: R002, R003
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement	N/D	N/D					MG	0		
STORET No. 00056 I Mon Site No. EFF-4	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement	N/D	N/D					MG	0		
STORET No. 00056 P Mon Site No. EFF-5	Permit Measurement	Report (Total Month)	Report (Max Daily Flow)	mg						Continuous during any overflow	Calculated Flow
Flow	Sample Measurement		.201					MGD	0		
STORET No. 50050 O Mon Site No. EFF-7	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Recording flowmeters and totalizer
Flow	Sample Measurement	.206						MGD	0		
STORET No. 50050 Y Mon Site No. EFF-8	Permit Measurement	Report (Mo Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.178					MGD	0		
STORET No. 50050 R Mon Site No. EFF-8	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement	.190						MGD	0		
STORET No. 50050 S Mon Site No. EFF-9	Permit Measurement	Report (Mo Avg)		mgd						Continuous with 6 readings/week	Calculated Flow
Flow	Sample Measurement		.150					MGD	0		
STORET No. 50050 T Mon Site No. EFF-9	Permit Measurement		Report (Mo Avg)	mgd						Continuous with 6 readings/week	Calculated Flow
TSS	Sample Measurement				8.0			mg/L	0		
STORET No. 00530 J Mon Site No. EFF-10	Permit Measurement				Report (Mo Avg)			mg/L		Weekly	8-hour FPC

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Southeast District, P.O. Box 15425, West Palm Beach, 33416

PERMITTEE NAME: Indiantown Utilities
MAILING ADDRESS: P. O. BOX 397
Indiantown, FL 34956

PERMIT NUMBER: FL0029939
MONITORING PERIOD From: 12-1-03
LIMIT: Final
CLASS SIZE: Minor

To: 12-31-03
REPORT: Monthly
GROUP: Domestic

FACILITY: Indiantown Company Wastewater Treatment Plant
LOCATION: 15851 S.W. Farms Road
Indiantown, FL 34956

FACILITY ID: FL0029939
GMS ID NO.: 5143P03291
DISCHARGE POINT NUMBER: Influent Monitoring Point
PLANT SIZE/TREATMENT TYPE: IIC

WAFR SITE NO.: 20552
GMS TEST SITE NO.: _____

COUNTY: Martin

Parameter		Quantity or Loading		Units	Quality or Concentration			Units	No. Ex.	Frequency of Analysis	Sample Type
CBOD5	Sample Measurement	293						mg/L	0		
TSS	Sample Measurement	317						mg/L	0		
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										
	Sample Measurement										

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DAILY SAMPLE RESULTS - PART B

D001

Permit Number:
Monitoring Period

FL0029939

From: 12-1-03

To: 12-31-03

Discharge y(n)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1	EFF-1				
1	ND						3.7				
2							3.5				
3							3.5				
4							3.3				
5							3.2				
6							3.4				
7							4.0				
8							4.3				
9							4.0				
10							3.6				
11							3.6				
12							3.5				
13							3.3				
14							3.2				
15							3.2				
16							3.2				
17							3.3				
18							3.4				
19							3.8				
20							3.8				
21							3.9				
22							4.2				
23							4.4				
24							4.3				
25							4.2				
26							3.8				
27							3.6				
28							3.4				
29							3.3				
30							3.2				
31	✓						3.0				

PLANT STAFFING:

Day Shift Operator

Class: B

Certificate No:

3634

Name:

DON C Johnson I

Evening Shift Operator

Class: B

Certificate No:

6747

Name:

JAMES G. Hewitt

Night Shift Operator

Class: B

Certificate No:

9439

Name:

ERIN WATSON

Lead Operator

Class:

Certificate No:

Name:

Type of Effluent Disposal or Reclaimed Water Reuse:

Limited Wet Weather Discharge Activated: Yes: No: Not Applicable: If yes, cumulative days of wet weather

*Amended addition of effluent is necessary to maintain effluent quality.

DAILY SAMPLE RESULTS - PART B

D002

Permit Number:

FL0029939

Monitoring Portals

From: 12211085

To: 122-371083

Ditching (10)

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Declorination) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2	EFF-2				
1	N.D.						5.1				
2							5.1				
3							4.8				
4							4.7				
5							4.7				
6							4.8				
7							5.0				
8							5.1				
9							5.1				
10							5.1				
11							5.1				
12							5.0				
13							4.9				
14							4.7				
15							4.6				
16							4.5				
17							4.9				
18							5.1				
19							5.1				
20							5.1				
21							5.1				
22							5.1				
23							5.1				
24							5.1				
25							5.1				
26							5.1				
27							5.1				
28							5.0				
29							4.8				
30							4.7				
31	✓						4.5				

DAILY SAMPLE RESULTS - PART B

D003

Permit Number:

FL0029939

Monitoring Period

From: 12-1-03

To: 12-31-03

Discharge y/n

	Flow (mg)	pH (Max)	pH (Min)	Fecal Coliform Bacteria (#/100mL)	TRC (For Dechlorinati on) (mg/L)	Dissolved Oxygen (mg/L)	Percolation Pond Water Elevation (feet)				
Code	00056	00400	00400	74055	50060	50060	85327				
Mon. Site	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3	EFF-3				
1	N.D						4.5				
2							4.4				
3							4.1				
4							3.8				
5							3.7				
6							3.5				
7							3.5				
8							3.5				
9							3.5				
10							3.7				
11							4.2				
12							4.3				
13							4.0				
14							3.8				
15							3.6				
16							3.5				
17							3.3				
18							3.1				
19							3.0				
20							2.8				
21							2.6				
22							2.5				
23							2.5				
24							2.6				
25							3.1				
26							4.1				
27							4.5				
28							5.0				
29							4.8				
30							4.6				
31	✓						4.3				

DAILY SAMPLE RESULTS - PART B

R001

Permit Number:
Monitoring Period

FL0029939

From: 12-1-03

To: 12-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

76%

	Flow, (MGD)	CBOD5 (mg/L)	CBOD5 (mg/L)	TSS (mg/l)	TSS (mg/L)	pH (Max) 5.4 7.6	pH (Min)	Fecal Coliform Bacteria (#/100ml)	TRC (For Disinfect.) (mg/l)	Rainfall (inches)
Code	50050	80082	80082	00530	00530	00400	00400	74055	50060	n/a
Mon. Site	EFF-6	EFF-6	INF-1	EFF-6	INF-1	EFF-6	EFF-6	EFF-6	EFF-6	OTH-1
1	.470						7.0		2.2	0
2	.540	9.8	185	11	58		7.0	.5	2.2	0
3	.500						7.0		2.0	0
4	.480						7.0		2.0	0
5	.490						7.0		2.2	0.1
6	.530						7.0		2.0	0
7	.570						7.0		2.0	0
8	.510						7.2		2.0	0
9	.520	9.8	291	7.2	226		7.1	2	2.2	0
10	.560						7.2		2.2	0
11	.470						7.0		2.0	0
12	.510						7.0		2.0	0
13	.530						7.1		2.2	0
14	.540						7.1		1.9	1.0
15	.510						7.1		2.2	0
16	.520	7.5	422	7.6	858		7.1	32	2.2	0.5
17	.670						7.2		2.2	0.1
18	.450						7.1		2.2	0
19	.500						7.1		1.5	0
20	.530						7.2		1.3	0
21	.520						7.0		1.5	0
22	.510	11	257	9.4	188		7.6	2	2.1	0.3
23	.500						7.6		2.2	0
24	.480						7.3		2.2	0
25	.480						7.3		2.2	0
26	.500						7.5		2.2	0
27	.540						7.3		2.2	0
28	.510						7.0		2.2	0
29	.510						7.3		2.2	0
30	.510	10	310	4.4	257		7.4	7	2.2	0
31	.550						7.5		1.7	0

DAILY SAMPLE RESULTS - PART B

Permit Number:
Monitoring Period

FL0029939

Cont. R001

From: 12-1-03To: 12-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

76%

	Nitrate as N	Nitrogen, Total as N	Phosphorus, Total as P										
Code	00620	00600	00665										
Mon. Site	EFF-6	EFF-6	EFF-6										
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													

U = Parameter was analyzed for but not detected

DAILY SAMPLE RESULTS - PART B

R002 and R003

Permit Number:
Monitoring Period

FL0029939

From: 12-1-03

To: 12-31-03

Three-month Average Daily Flow:
(TMADF/Permitted Capacity)x100:

75%

	Flow, (MG)	Flow, (MG)	Flow, (MGD)	Flow, (MGD)	Flow, (MGD)	TSS (mg/l)	Percolation Pond Water Elevation (feet)	Percolation Pond Water Elevation (feet)				
Code	00056	00056	50050	50050	50050	00530	85327	85327				
Mon. Site	EFF-4	EFF-5	EFF-7	EFF-8	EFF-9	EFF-7	EFF-4	EFF-5				
1	N/D	N/D	0		0		4.0	3.9				
2			0		0		3.9	3.8				
3			.058	.058	0		3.7	3.8				
4			.257	.257	0		3.6	4.0				
5			.295	.295	0		3.6	4.3				
6			.221	.221	0		3.7	4.2				
7			.086	.086	0		3.8	4.0				
8			.081	.081	0		3.9	4.0				
9			.196	.196	0	6.6	4.1	3.9				
10			.303	.303	0		4.4	3.8				
11			.173	.173	0		4.4	3.9				
12			.287	.095	192		4.3	4.1				
13			.326	.326			4.1	4.4				
14			.229		.229		4.0	4.3				
15			0	0	0		3.9	4.1				
16			0	0	0		3.9	4.3				
17			0	0	0		3.8	4.2				
18			.275	.026	.249		3.9	4.3				
19			.298	.298	0		3.7	4.1				
20			.260		.260		3.9	4.3				
21			.125		.125		3.8	4.5				
22			.139	.139	0		3.8	4.4				
23			.305	.305	0	22	3.8	4.4				
24			0	0	0		3.9	4.6				
25			0	0	0		3.8	4.5				
26			.181	.095	.096		3.8	4.4				
27			0	0	0		3.8	4.2				
28			.021	.010	.011		3.9	4.2				
29			.266	.266	0		3.9	4.1				
30			0	0	0	3.2	3.9	4.0				
31	✓	✓	0	0	0		4.1	3.9				