

State of Florida



RECEIVED-FPSC
09 JUL 16 AM 10:36
COMMISSION
CLERK

Public Service Commission

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

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

DATE: July 15, 2009
TO: Ann Cole, Commission Clerk - PSC, Office of Commission Clerk
FROM: Richard P. Redemann, Professional Engineer III, Division of Economic Regulation *RR*
RE: Docket No. 080714-WS – Application for staff-assisted rate case in Lake County
by Hidden Valley SPE LLC d/b/a Orange Lake Utilities.

A customer meeting was held on June 29, 2009, in Clermont. Attached please find an email response from Mr. Gary Morse, utility consultant, to the customer concerns indicating the customer issues were resolved quickly. Please place this memo in the docket file.

C:\msword\080714 cust meet utility.doc

cc: Division of Economic Regulation (Fletcher, Deason)
Office of General Counsel (Hartman)

DOCUMENT NUMBER-DATE
07174 JUL 16 8
FPSC-COMMISSION CLERK

Richard Redemann

From: Gary Morse [gmorse4@tampabay.rr.com]
Sent: Wednesday, July 01, 2009 9:01 AM
To: Richard Redemann
Cc: Robert Munro
Subject: Fw: FPSC customer meeting

Attachments: BOIL WATER.TIF; LIFT STATION PUMP.TIF; LATERAL LINE.TIF

  
BOIL LIFT LATERAL
TER.TIF (39PUMP.TIF (E.TIF (173

Richard

Take a look at this info that we have compiled relating to the customer meeting for Orange Lake and the customer who spoke to BOIL water notice and sewer backups. These were resolved very quickly by vendors.

Gary

----- Original Message -----

From: "Robert Munro" <rmunro@hometownamerica.net>
To: "Gary Morse" <gmorse4@tampabay.rr.com>
Sent: Tuesday, June 30, 2009 1:55 PM
Subject: FW: FPSC customer meeting

Gary

I am pleasantly surprised that we received an answer so quickly. I think this should take care of what the FPSC is looking for and I trust that you will forward this information on to them. Because You are THE MAN!!
Let me know if you need anything else on my end

Have a GREAT day
Robert

-----Original Message-----

From: Renee Walters
Sent: Tuesday, June 30, 2009 12:13 PM
To: Robert Munro
Cc: Danny Ellis; 'Gary Morse'; Eric Zimmerman
Subject: RE: FPSC customer meeting

Robert,

Attached are the records for the sewer line blockage and last boil water notice of which was in December 2008.

We had the lift station pump replace due to failure by Wayne's Diversified In February.
We then had Altair cut the lateral line that was protruding into the main sanitary line causing backups.

DOCUMENT NUMBER-DATE
07174 JUL 16 8
FPSC-COMMISSION CLERK

These two projects were resolved quickly upon approval. We have not had any further issues with the lift station.

Renee'
Renee' Walters
Community Manager
Orange Lake (SE2)
407-877-3001 / Office
312-205-1296 / Fax

From: Robert Munro
Sent: Tue 6/30/2009 9:30 AM
To: Renee Walters
Cc: Danny Ellis; 'Gary Morse'; Eric Zimmerman
Subject: FPSC customer meeting

Renee

It was good to see you yesterday, I wanted to remind of the two issues we need information about to send to the FPSC.

1. The issue of the blockage in the sanitary sewer line, I looked back in my records and the blockage was on or around January 27, 2009.
2. The other issue that was brought up at the customer meeting was about the boil water notice. I looked back in my records and I do not have any information about the water being shut off or the notice.

We need to provide the FPSC with information about both the sewer line blockage and the boil water notice. They will want to know when the events took place? What we did to resolve these issues? How long was the sewer line backed up? How long were we under the boil water notice and how many residential sites were effected?

We need to have this information as soon as possible

Thanks in advance

Have a GREAT day

Robert

December 11, 2008

ADVISORY PRECAUTIONARY BOIL WATER NOTICE
EFFECTIVE DECEMBER 15, 2008 BEGINNING AT 9:00 A.M.
FOR APPROXIMATELY 3 HOURS

TO: RESIDENTS OF ORANGE LAKE MHC, LIVING IN THE AREA
BOUNDED BY STATE ROAD 50, CLERMONT, FLORIDA

THE WATER TREATMENT SYSTEM WILL BE TEMPORARILY SHUT
DOWN FOR REPAIRS TO WELL PUMPS.

THEREFORE, AS A PRECAUTION, WE ADVISE THAT ALL WATER
USED FOR DRINKING, COOKING, MAKING ICE, BRUSHING
TEETH, OR WASHING DISHES BE BOILED. A ROLLING BOIL OF
ONE MINUTE IS SUFFICIENT. AS AN ALTERNATIVE BOTTLED
WATER MAYBE USED.

THIS "PRECAUTIONARY BOIL WATER NOTICE" WILL REMAIN IN
EFFECT UNTIL THE PROBLEM HAS BEEN CORRECTED AND A
BACTERIOLOGICAL SURVEY SHOWS THAT THE WATER IS SAFE
TO DRINK.

IF YOU HAVE ANY QUESTIONS YOU MAY CONTACT RENEE
WALTERS, ORANGE LAKE MHC, AT 407-877-3001.



RENEE WALTERS, COMMUNITY MANAGER
ORANGE LAKE MHC

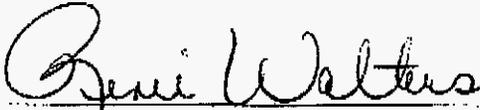
December 18, 2008

RESCISSION OF PRECAUTIONARY BOIL WATER NOTICE

TO: RESIDENTS OF ORANGE LAKE LIVING IN THE AREA
BOUNDED BY STATE ROAD 50, CLERMONT, FL

THE DECEMBER 11, 2008 "ADVISORY PRECAUTIONARY BOIL WATER NOTICE" IS HEREBY RESCINDED FOLLOWING THE WELL REPAIRS AND THE SATISFACTORY COMPLETION OF THE BACTERIOLOGICAL SURVEY SHOWING THAT THE WATER IS SAFE TO DRINK.

IF YOU HAVE ANY QUESTIONS, PLEASE CALL RENEE WALTERS,
ORANGE LAKE MHC, AT 407-877-3001.



RENEE WALTERS, COMMUNITY MANAGER
ORANGE LAKE MHC

CapX Project **Lift Station P 1/5** Project ID: 1135

General Project Information

Project Name: Emergency Pump replacement, Lift Station
 Project #: 12820951
 Budget Start Month: January(2009)
 CapX Code: ST - Sewer/Septic System Costs
 Type: Unbudgeted
 Status: Approved

Community: Orange Lake Utility Company
 Approval Date: 2/1/2009
 Estimated Completion Date: 1/1/2009
 Account Code: 1120 - Land Improvements
 Operations Unit number: 1282
 Estimated Project Cost: \$2,050.00

Reason

Lift station pump failed causing the lift station to back up and set off alarm. Called the operator and was told the pump was bad and needed to be replaced.

Capex Approval Form

Capex Approval Form #	Title	Status	Amount	Action
1135 - 1	Emergency Pump replacement, Lift Station	Approved	\$2,050.00	

Budget Details

Original Budget	Reallocations	Over Budget	Revised Budget	Net Commitments	Left to Spend	JOB Actual Cost	Estimated Cost to Complete
\$0.00	\$2,050.00	\$0.00	\$2,050.00	\$2,050.00	\$0.00	\$2,050.00	\$0.00

View Files

Filename	Comment	Action
Lift Station Pump.JPG	New pump for lift station	

Reallocations

Note: * denotes a Required field.

Select a Project: Project Name - Left to Spend - Category Code Transfer Amount:

Comments:

Actions

Log

2/1/2009	Eric Zimmerman	Project has been Approved
2/1/2009	Eric Zimmerman	Reason for Relocation - We have a new maintenance shed that when we relocate the items from the existing shed it can be used for the chemical with little modification.
2/1/2009	Eric Zimmerman	Reallocation amount \$2,050.00 has been Approved from Orange Lake Utility Company-Clerical and Records Shed to Orange Lake Utility Company-Emergency Pump replacement, Lift Station
1/30/2009	Danny Ellis	Project has been Sent to Division President
1/30/2009	Danny Ellis	We have a new maintenance shed that when we relocate the items from the existing shed it can be used for the chemical with little modification.
1/29/2009	Renee Walters	Project has been Sent to Regional Manager
1/29/2009	Renee Walters	The lift station pump failed causing it to overflow. I called the operator who called Wayne to tell him about the pump. Wayne replaced it.

Lift Station P2/5 Capex Approval Form #: 1135-1

General

Description: Emergency Pump replacement, Lift Station
 Community: Orange Lake Utility Company
 Status: Approved

Amount: \$2,050.00
 Approval Date: 2/3/2009

Required Documents for Selected Vendor

Insurance Certificate 1 N/A Insurance Certificate 2 N/A
 Insurance Certificate 3 N/A Bid/Quote N/A
 Contract N/A Professional Licenses and state and local permits: N/A

View Files

Filename	Comment	Action
Lift Station Pump 11F	Emergency Pump replacement, Lift Station	

Selected Vendor Information

Vendor ID: 21601
 Company Name: Wayne's Diversified Service
 Contact Person: Wayne
 Bid Amount: \$2,050.00
 Phone: 407-407-8300
 Address: P.O. Box 5177
 City: Dufrenoy State: Florida Zip: 32728
 Notes:

Vendor Information

Vendor ID:
 Company Name:
 Contact Person:
 Bid Amount: \$0.00
 Phone:
 Address:
 City: State: Zip:
 Notes:

Vendor Information

Vendor ID:
 Company Name:
 Contact Person:
 Bid Amount: \$0.00
 Phone:
 Address:
 City: State: Zip:
 Notes:

Vendor Information

Vendor ID:
 Company Name:
 Contact Person:
 Bid Amount: \$0.00
 Phone:
 Address:
 City: State: Zip:
 Notes:

Log

2/1/2009	Eric Zimmerman	Capex Approval Form has been Approved
2/2/2009	Danny Ellis	Capex Approval Form has been Sent to Division President
2/2/2009	Danny Ellis	Please make sure to log information on pump and date of install. Also obtain warranty information for your files.
2/2/2009	Renee Walters	Capex Approval Form has been Sent to Regional Manager
2/2/2009	Renee Walters	This was an emergency pump replacement. Please pay by the attached invoice.

CapX Vendor Payment Detail Lift Station P 3/5 Vendor Payment #: 45

General Project Information

Project Name: Emergency Pump replacement, Lift Station	Community: Orange Lake Utility Company
Project #: 12820951	Approval Date: 2/1/2009
Budget Start Month: January(2009)	Estimated Completion Date: 1/1/2009
CapX Code: S1 - Sewer/Septic System Costs	Account Code: 1120 - Land Improvements
Type: Unbudgeted	Operations Unit number: 1282
Status: Approved	Estimated Project Cost: \$2,050.00

General Vendor Payment Information

Vendor Name: Wayne's Diversified Services	Vendor ID: 24601
Invoice #: 121608-240	Invoice Amount: \$2,050.00
Approval Date: 2/4/2009	Invoice Date: 1/17/2009
Status: Paid	

Description
Install new pump in lift station

Check Mailing Instructions
Check Destination: **SEND CHECK DIRECTLY TO VENDOR**

Required Documents

Invoice 1: View File	Invoice 2: N/A	Invoice 3: N/A
Lien Waiver: N/A	Original Contract: N/A	

View Files
NO files!

Log

2/10/2009	Lisa Varghese	Payment to Vendor Wayne's Diversified Services with an amount of \$2,050.00 and Invoice Date of 1/17/2009 has been Marked as Paid
2/6/2009	Amie Lenon	Review Completed
2/3/2009	Lisa Varghese	Vendor Payment has been sent for processing
2/4/2009	Danny Ellis	Payment of \$2,050.00 for Vendor Wayne's Diversified Services on Capex Approval Form No. 1135-1 has been Approved
2/4/2009	Renee Walters	Payment of \$2,050.00 for Vendor Wayne's Diversified Services on Capex Approval Form No. 1135-1 has been Sent to Regional Manager
2/4/2009	Renee Walters	Invoice stamped for payment

Vendor Payment Summary

Lift Station P4/5 Capex Approval Form#: 1135-1

General

Project Name: Emergency Pump replacement, Lift Station Capex Approval Form Status: Approved
Project #: 12820951 Capex Approval Form Amount: \$2,050.00

Vendor Payments

Vendor Payment #	Vendor Name	Vendor ID	Status	Invoice #	Invoice Amount	View
45	Wayne's Diversified Services	24601	Paid	121608-240	\$2,050.00	Open

Total Invoice Amount: \$2,050.00

Wayne's Diversified Services

P. O. Box 5177
Deltona, FL 32728
Phone 407-402-8300

INVOICE

Lift Station P515

OrangeLake MHP
Clermont, Fl.

INVOICE #121608-240
DATE: DECEMBER 17, 2008

DESCRIPTION	AMOUNT																				
Installed new pump in lift station	\$2050.00																				
<table border="1"> <tr> <td>BU # <u>1282</u></td> <td>Supplier # <u>24601</u></td> </tr> <tr> <td>CapEx PO # _____</td> <td></td> </tr> <tr> <td>Invoice # <u>121608-240</u></td> <td></td> </tr> <tr> <td>GL Acct. # _____</td> <td>Description _____ Amt _____</td> </tr> <tr> <td><u>73520</u></td> <td><u>Install</u> <u>2050.00</u></td> </tr> <tr> <td></td> <td><u>pump at</u></td> </tr> <tr> <td></td> <td><u>lift station</u></td> </tr> <tr> <td></td> <td>Total <u>2050.00</u></td> </tr> <tr> <td>Manager Approval <u>(Signature)</u></td> <td>Date <u>1-15-09</u></td> </tr> <tr> <td>Additional Approval _____</td> <td>Date _____</td> </tr> </table>		BU # <u>1282</u>	Supplier # <u>24601</u>	CapEx PO # _____		Invoice # <u>121608-240</u>		GL Acct. # _____	Description _____ Amt _____	<u>73520</u>	<u>Install</u> <u>2050.00</u>		<u>pump at</u>		<u>lift station</u>		Total <u>2050.00</u>	Manager Approval <u>(Signature)</u>	Date <u>1-15-09</u>	Additional Approval _____	Date _____
BU # <u>1282</u>	Supplier # <u>24601</u>																				
CapEx PO # _____																					
Invoice # <u>121608-240</u>																					
GL Acct. # _____	Description _____ Amt _____																				
<u>73520</u>	<u>Install</u> <u>2050.00</u>																				
	<u>pump at</u>																				
	<u>lift station</u>																				
	Total <u>2050.00</u>																				
Manager Approval <u>(Signature)</u>	Date <u>1-15-09</u>																				
Additional Approval _____	Date _____																				
TOTAL	\$2050.00																				

Lisa Wilco

Make all checks payable to Wayne's Diversified Services
Payment is due within 30 days.

If you have any questions concerning this invoice, contact Wayne, 407-402-8300, waynesdiversified@hotmail.com

Thank you for your business!

CapX Project Service Line P116 Project ID: 1222

General Project Information

Project Name: Cut internal line protruding into the main sanitary	Community: Orange Lake Utility Company
Project #:	Approval Date: 2/26/2009
Budget Start Month: March(2009)	Estimated Completion Date: 3/15/2009
CapX Code: SDN - Sewer Dist, Network Costs	Account Code: 1120 - Land Improvements
Type: Unbudgeted	Operations Unit number: 1282
Status: Approved	Estimated Project Cost: \$3,600.00

Reason
Need to cut the internal line that is protruding into the main sanitary line that caused major problems with backups.

Capex Approval Form

Capex Approval Form #	Title	Status	Amount	Action
1222 - 1	Service Lateral Curing and Chemical Grouting	Sent to Regional Manager	\$3,600.00	

Budget Details

Original Budget	Reallocations	Over Budget	Revised Budget	Net Commitments	Left to Spend	JDE Actual Cost	Estimated Cost to Complete
\$0.00	\$3,600.00	\$0.00	\$3,600.00	\$0.00	\$3,600.00	\$0.00	\$3,600.00

View Files

Filename	Comment	Action
Altair bid .TIF	Cut lateral line protruding into the main sanitary line	

Reallocations

Note: * denotes a Required field.

Select a Project: * Transfer Amount: *

Comments:

Actions

Log

2/26/2009	Eric Zimmerman	Project has been Approved
2/26/2009	Eric Zimmerman	Reason for Reallocation - Allocated per Robert's instructions.
2/26/2009	Eric Zimmerman	Reallocation amount \$3,600.00 has been Approved from Orange Lake Utility Company Drainage with the project number of 11080905 to Orange Lake Utility Company-Cut internal line protruding into the main sanitary
2/25/2009	Danny Ellis	Project has been Sent to Division President
2/23/2009	Renee Walters	Project has been Sent to Regional Manager
2/23/2009	Renee Walters	Per Robert Murray we are to use the money for the drainage in the operations (108 cap ex budget. This project is to cut the internal line that is protruding into the main sanitary line. I previously sent this through on the 1108 operations cap ex but was sent back from Eric to be coded to the utilities.

Service Line P 2/6

710 S Milwee Street
Longwood, Florida 32750
Tel: 407-339-7134
Fax: 407-339-6618
e-mail address:
altairgroup@earthlink.net
Website:
www.altairenvironmental.com



Trenchless Pipeline Services:

- Lateral Lining
- In-Situ Point Repair
- Manhole Lining & Repair
- Chemical Grouting
- TV Inspection
- Pipeline Cleaning
- Smoke Testing

This Agreement is made on this 3rd Day of February, 2009, by and between

Altair Environmental Group, LLC, a Florida Limited Liability Company,
whose address is 710 S Milwee Street, Longwood, Florida 32750
(hereinafter referred to as "ALTAIR")
and

**Orange Lake #1108
Hometown America Communities**

whose address is

**15640 SR 50 Lot 32
Clermont, FL 34711-8711**

(hereinafter referred to as "the Client")

WITNESSETH, that the Client and ALTAIR, for the consideration named hereafter agree as follows:

1. DESCRIPTION OF SERVICES: ALTAIR agrees to furnish qualified personnel, equipment, and materials to perform in a workman-like manner, the following services:

Service Lateral Cutting and Chemical Grouting

2. SITE OF WORK: The service or services described in this AGREEMENT will be performed at the following site location:

Lift Station Area at Cheyenne Loop; Orange Lake; Clermont, Florida

3. CLIENT RESPONSIBILITIES: The Client will provide the following services, throughout the duration of the project, at no cost to ALTAIR:

- a) Access to site of work for ALTAIR personnel and equipment, without delay.
- b) Authorized representative of the Client at the site of work, at all times services are being performed and with authority to accept the services as completed and / or hours worked under this AGREEMENT.

Service Line P 316

4. **PRICE:** The Client agrees to pay ALTAIR for the services provided under this AGREEMENT, including any down time, as follows:

Labor, Equipment & Materials \$3,600.00 Lump Sum

The projected hours and price are estimated only and in no way binds ALTAIR to a final timescale or price for the services to be provided under this AGREEMENT. The actual hours will be determined by specific site requirements and operational demands, which cannot be wholly determined prior to work commencement due to the nature of the services to be provided.

5. **DOWN TIME / DAY RATE:** A down time or day rate will apply in the event of any changes to the services to be provided under this AGREEMENT or any of the following situations:

- a) Time lost or work stoppages due to circumstances beyond the direct control of ALTAIR.
- b) Unforeseen circumstances being encountered during the provision of the services to be provided under this AGREEMENT, particularly any underground structure problems causing delay or stoppage of the work.
- c) Any additional work beyond the scope of services included in this AGREEMENT.

Down Time / Day Rate \$360.00 per hour

The above rate includes any personal accommodation costs where applicable.

6. **TERMS:** The price / rates quoted herein will remain fixed for a period of 30 days from the date of this AGREEMENT and are no longer valid thereafter.

7. **PAYMENT TERMS:** Invoices will be delivered to the address provided by the Client on completion of the services to be provided under this AGREEMENT. If the services extend beyond a one month period, ALTAIR will submit monthly invoices covering services performed during the preceding month. Payment is due within 15 days from the invoice date, unless terms are agreed otherwise, in writing from ALTAIR. Any dispute or query regarding the invoiced amount must be communicated in writing within 10 days (objection period) from the invoice date and Client will be deemed to have accepted the invoice as delivered unless objected to within the objection period.

8. **REMEDIES FOR NON PAYMENT:** All sums not paid when due will bear interest at the rate of 2.5% per month from due date until paid or the maximum legal rate permitted by law, whichever is less. In the event a controversy arises between the parties to this AGREEMENT, the prevailing party shall be entitled to all costs of collection, including a reasonable attorney's fee. In addition, if the Client fails to make payment to ALTAIR as herein provided, then ALTAIR may stop work without prejudice to any other remedy it may have. The parties further agree that in the event any controversy should arise between them as a result of this AGREEMENT, then in that event, the State Courts of Seminole County, Florida, shall be the forum in which the parties agree to try and have heard any matters of litigation arising out of such controversies.

9. **WARRANTIES:** All workmanship and materials are guaranteed against defects in workmanship for a period of one year from the date of substantial completion of the project. This warranty is in lieu of all other warranties, expressed or implied, including any warranties of merchantability or fitness for a particular purpose. ALTAIR will not be responsible for damage to its work by other parties. Any repair work necessitated by caused damage will be considered as an order for extra work.

Service Line P416

10. INDEPENDENT CONTRACTOR: Both ALTAIR and the Client agree that ALTAIR will act as an independent contractor in the performance of its duties under this contract. Accordingly, ALTAIR shall be responsible for payment of all taxes, including Federal, State, and local taxes arising out of ALTAIR's activities in accordance with this contract, including by way of illustration but not limitation, Federal and State income tax, Social Security tax, Unemployment Insurance taxes, and any other taxes.

11. CLIENT SERVICE ORDERS: In the event that the Client chooses to issue a service order, whether verbal or in writing, such service order shall be governed by and be deemed to include the provisions of this AGREEMENT. In the event of any inconsistency between the terms and conditions of this AGREEMENT and the terms of a service order, the terms and conditions of this AGREEMENT shall prevail.

12. CONTRACT ACCEPTANCE: In the event that the Client fails to sign this AGREEMENT, due to oversight by either or both parties or any other reason and the services are commenced or completed on the Client's written or verbal instruction due to emergency, urgency or some other reason, then the terms of this AGREEMENT will be deemed to have been accepted by the Client as if this AGREEMENT had been signed.

This AGREEMENT entered into as of the day and year first written above.

ACCEPTED BY:

SUBMITTED BY:

Orange Lake #, 1108
Hometown America Communities

Altair Environmental Group, LLC



Signature

Signature

Donald Layton

Name (Printed or Typed)

Name

Operations Director

Title

Title

February 3, 2009

Date

Date

CapX Vendor Payment Detail Service Line P516 Vendor Payment #: 622

General Project Information	
Project Name: Cnt lateral line protruding into the main sewer	Community: Orange Lake Utility Company
Project #: 12R20934	Approval Date: 2/26/2009
Budget Start Month: March(2009)	Estimated Completion Date: 3/15/2009
CapX Code: SDN - Sewer Dist. Network Costs	Account Code: 1120 - Land Improvements
Type: Unbudgeted	Operations Unit number: 1282
Status: Closed	Estimated Project Cost: \$3,600.00

Budget Details							
Original Budget	Reallocations	Over Budget	Revised Budget	Net Commitments	Left to Spend	JDB Actual Cost	Estimated Cost to Complete
\$0.00	\$3,600.00	\$0.00	\$3,600.00	\$3,600.00	\$0.00	\$3,600.00	\$0.00

General Vendor Payment Information	
Vendor Name: Altair	Vendor ID: 10116
Invoice #: 2230	Invoice Amount: \$3,600.00
Approval Date: 4/15/2009	Invoice Date: 4/9/2009
Status: Paid	

Description
 Cnt lateral line at lift station

Check Mailing Instructions
 Check Destination: **SEND CHECK DIRECTLY TO VENDOR**

Required Documents		
Invoice 1: View File	Invoice 2: N/A	Invoice 3: N/A
Lien Waiver: N/A	Original Contract: N/A	

View Files
 No Files

Log		
4/16/2009	Chris Hoss	Payment to Vendor Altair with an amount of \$3,600.00 and Invoice Date of 4/9/2009 has been Marked as Paid
4/15/2009	Anne Fardon	Review Completed
4/15/2009	Kristen Smith	Vendor Payment has been sent for processing.
4/15/2009	Danny Ellis	Payment of \$3,600.00 for Vendor Altair on Capex Approval Form No. 1222-1 has been Approved
4/14/2009	Russel Walters	Payment of \$3,600.00 for Vendor Altair on Capex Approval Form No. 1222-1 has been Sent to Regional Manager



710 S Milwee Street
Longwood, FL 32750

Service Line # 616

Invoice

Date	Invoice #
4/2/2009	2230

Bill To
HomeTown America Communities Attention: Renee' Walters Orange Lake # 1108 15840 SR 50 Lot 32 Clermont, Florida 34711-8711

P.O. No.	Terms	Project
	Net 30	09-008-06 Orange L...

Quantity	Description	Rate	Amount																				
1	Service Lateral Cutting & Chemical Grouting, Lift Station at Cheyenne Loop, Orange Lake # 1108	3,600.00	3,600.00																				
Report of Findings are Attached. Report of Findings also forwarded to Robert Munro																							
<table border="1" style="width: 100%;"> <tr> <td>BU # <u>1282</u></td> <td>Supplier # <u>10116</u></td> </tr> <tr> <td>CapEx PO # _____</td> <td></td> </tr> <tr> <td>Invoice # <u>2230</u></td> <td></td> </tr> <tr> <td>GL Acct. # _____</td> <td>Description _____ Amt _____</td> </tr> <tr> <td><u>1120</u></td> <td><u>Cut lateral</u> <u>3600.00</u></td> </tr> <tr> <td></td> <td><u>Cutting at</u></td> </tr> <tr> <td></td> <td><u>Lift Station</u></td> </tr> <tr> <td>Manager Approval: <u>RW</u></td> <td>Total <u>3600.00</u></td> </tr> <tr> <td>Additional Approval: _____</td> <td>Date <u>4-14-09</u></td> </tr> <tr> <td></td> <td>Date _____</td> </tr> </table>				BU # <u>1282</u>	Supplier # <u>10116</u>	CapEx PO # _____		Invoice # <u>2230</u>		GL Acct. # _____	Description _____ Amt _____	<u>1120</u>	<u>Cut lateral</u> <u>3600.00</u>		<u>Cutting at</u>		<u>Lift Station</u>	Manager Approval: <u>RW</u>	Total <u>3600.00</u>	Additional Approval: _____	Date <u>4-14-09</u>		Date _____
BU # <u>1282</u>	Supplier # <u>10116</u>																						
CapEx PO # _____																							
Invoice # <u>2230</u>																							
GL Acct. # _____	Description _____ Amt _____																						
<u>1120</u>	<u>Cut lateral</u> <u>3600.00</u>																						
	<u>Cutting at</u>																						
	<u>Lift Station</u>																						
Manager Approval: <u>RW</u>	Total <u>3600.00</u>																						
Additional Approval: _____	Date <u>4-14-09</u>																						
	Date _____																						
Thank you for your business.			Total \$3,600.00																				

Phone #	Fax #
407-339-7134	407-339-6618