LP WATERWORKS, INC.

March 13, 2025

Office of Commission Clerk Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL 32399 2025 MAR 17 PH 3: 21
COMMISSION COMISSION COMISSION COMMISSION COMMISSION COMMISSION COMMISSION COMMISSION COM

Re: Docket No. 20250013-WS - Application for Staff Assisted Rate Case (SARC) in Highlands County by LP Waterworks, Inc. – Response to Staff Second Data Request

Dear Commission Clerk,

LP Waterworks, Inc. (LPWW or Utility) hereby requests its response to Staff Second Data Request in the above referenced docket.

CLK ___

1. For item FDR-2, Purchased Power, the request covered the time period from the beginning of the test year to the present. However, bills for three of the meters did not include more than the first three days of the month of October 2024. Also, none of the bills for the meters went beyond October, 2024. In addition, the bill for meter # 177361 for June 2024 was missing. Please provide the missing bills as indicated by the shaded portions of the attached worksheet for Purchased Power – Usage.

Response: See attached missing invoices, as well as invoices for February 2025.

2. Also for FDR-2, please indicate what component of LP's water or wastewater system each meter serves. If the meter is located sufficiently remotely from the system component it serves, such that the two locations have a different address, please indicate the address of the system component in the Notes section of the attached worksheet, Purchased Power – Meters, for the respective meter address listed on the Duke Energy bill.

Response: For water, there are two (2) water treatment plants. Meter # 175400 is for the water treatment plant inside the park located at 234 Shoreline Drive and Meter # 2773389 is for the water treatment plant outside the park located at 1535 US Hwy 27. For wastewater the power is for the wastewater treatment plant – Meter # 177387 located at 160 County Road 29; and two lift stations. Meter # 177361 is for the lift station located at 178 Shoreline Dr.; and Meter # 3975234 is for the water well at the wastewater treatment used for treatment and maintenance at the plant, it is also located at 160 County Road 29.

3. Please see the attached worksheet for FDR-3, Chemicals. Please give a full description of the item in red font, "Chlorine-EPA Reg. No. 7870-2," and explain why it is needed and why the cost on the invoice for that item is so much more than the costs for the items on the other invoices.

[Type here]

Response: That is the actual gas chlorine used for water treatment and disinfection. The other items are for the chlorine tanks. Hawkins charges a monthly fee for the tanks.

4. For FDR-8, Primary/Secondary Water Quality Tests, please provide the latest test results for each well for Synthetic Contaminants, and for each test point in the distribution system, as appropriate, for the Disinfection Byproducts results.

Response: See attached.

5. For FDR-9, DEP Monthly Operating Reports (MOR) for Water, please submit the MORs for November 2023, April 2024, and July 2024.

Response: See attached.

6. In addition to the MORs for the water system, please submit the DEP Discharge Monitoring Reports for the test year, November 2023 through October 2024.

Response: See attached.

7. For FDR-10, Monthly Metered Water Sold to Customers, LP provided the information requested. However, to allow staff to calculate the wastewater system's inflow and infiltration, please submit the monthly gallons of water sold to customers who have both water and wastewater service only (i.e. omitting water-only customers), separated by customer class.

Response: See attached.

8. For FDR-14, Water and Wastewater Assets, the Utility's response was, "See 2023 Annual Report filed with the Florida Public Service Commission." However, not all of the information in the 2023 annual report matched the information provided in LP's SARC application. Staff compared the information provided in the application, the 2023 annual report, DEP's last sanitary survey and the Utility's current DEP wastewater permit, as well as the Commission's audit work papers from Docket No. 20160222-WS, which included the system descriptions in U.S. Water's contract with LP. Attached are spreadsheets summarizing staff's findings in this comparison for water and for wastewater, along with copies of the source material with the mismatched items highlighted. They are also highlighted on the summary spreadsheets. Please investigate and provide staff with the correct system information.

Response: Asset listing requested is attached. The well capacities is limited by the Water Management District Consumptive Use Permit (CUP) effective November 29, 2017.

9. For FDR-15, Number of Customers by Meter Size and Class for Three Points in Time (present, test year, each of four years prior to the test year) for Water and Wastewater, the Utility's response was, "See Annual Reports filed with the Florida Public Service Commission." However, the annual reports on file with the Commission do not provide the responsive information for 2024 and for the present. Please submit the attached worksheet for FDR-15 with the required information inserted.

4939 Cross Bayou Boulevard ~ New Port Richey, Florida 34652
Tel: 727-848-8292

Response: See attached. In reviewing this information, it was discovered that the incorrect information was used to calculate the proposed wastewater rates. This has been revised and a new schedule is provided.

10. For FDR-16, System Maps for Water and Wastewater, the Utility's response was, "This was previously provided in Docket No. 20220099-WS, see Document No. 04205-2022." However, Docket No. 20220099-WS only involved the water system, so the only system maps provided were for the water system. However, the system maps did not include the wells or water treatment plants and the water mains thereto, the service to customers, storage, or fire hydrants. As for the wastewater system maps, the maps should include the wastewater treatment plant (WWTP) and percolation ponds, collection system mains, indicating both type and size, from the WWTP to the service area and to each service connection, lift station(s), and manholes. Based on LP's responses to the FDR, it appears that the Utility may not be in possession of adequate system maps. However, Rule 25-30.125, Florida Administrative Code, requires each utility to maintain suitable maps of its system and facilities. As a utility owner, LP should produce these maps if it does not have them, and update them as needed when changes are made to its systems. Please provide the required water and wastewater system maps.

Response: Requested maps enclosed.

Respectfully Submitted,

Troy Rendell Vice President

Investor Owned Utilities //For LP Waterworks, Inc.

fb.def.duke.bills.20250206205552.38.afp-64631-000001325

Service address

LP WATERWORKS INC 1535 US HIGHWAY 27 S PUMP CAMPER CORRAL

Feb 7, 2025 Bill date For service Jan 7 - Feb 5 30 days

Account number 9100 8906 4168

Billing summary

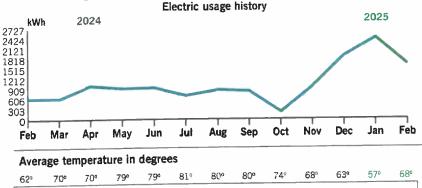
| Total Amount Due Feb 28 | \$260.08 |
|--------------------------|----------|
| Taxes | 26,46 |
| Current Electric Charges | 233.62 |
| Payment Received Jan 29 | |
| | -381.43 |
| Previous Amount Due | \$381.43 |

\$

Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 7.2%, Purchased Power 3.8%, Gas 82.7%, Oil 0.1%, Nuclear 0%, Solar 6.2% (For prior 12 months ending December 31, 2024).

Your usage snapshot



| 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 74° | 68° | 63° | 57° | 68° |
|--------|----------|--------|--------|---------|--------|---------|------|--------|------|--------|---------|-------|
| | | C | urrent | Month | Feb | 2024 | 12-M | onth U | sage | Avg Mo | nthly 1 | Usage |
| Electr | ic (kWh | 1) | 1,6 | 12 | 6 | 35 | | 13,021 | | | ,085 | |
| Avg. [| Daily (k | Wh) | 54 | 1 | 1 | 20 | | 36 | | | | |
| 12-m | onth us | age ba | sed on | most re | cent h | istory_ | | | | | | |

Approved: V

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 4168

Amount of automatic draft

\$260.08 by Feb 28

greater.

Your payment is scheduled to be made by monthly automatic draft on Feb 28

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

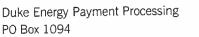
Amount enclosed

032316 000001325 մինինիինինինինինինինինինինիներիներինությեւ



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





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Charlotte, NC 28201-1094



| Current electric u | sage for meter number 27733 | 89 |
|---------------------|-----------------------------|-----------|
| Actual reading on I | Feb 5 | 71088 |
| Previous reading of | | - 69476 |
| Energy Used | | 1,612 kWh |
| Billed kWh | 1,612.000 kWh | |

Billing details - Electric

| Billing Period - Jan 07 25 to Feb 05 25 | |
|---|----------|
| Meter - 2773389 | |
| Customer Charge | \$17.23 |
| Energy Charge | |
| 1,612.000 kWh @ 9.302c | 149.94 |
| Fuel Charge | |
| 1,612.000 kWh @ 3.925c | 63.27 |
| Asset Securitization Charge | |
| 1,612.000 kWh @ 0.197c | 3.18 |
| Total Current Charges | \$233.62 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$26.46 |
|---------------------------|---------|
| County Optional Tax | 3.59 |
| Gross Receipts Tax | 6.00 |
| Regulatory Assessment Fee | 0.20 |
| State And Other Taxes | \$16.67 |

Service address

LP WATERWORKS INC 234 SHORELINE DR CAMP FL WTR PLANT

Feb 7, 2025 Bill date For service Jan 7 - Feb 5

30 days

Account number 9100 8906 3125

Billing summary

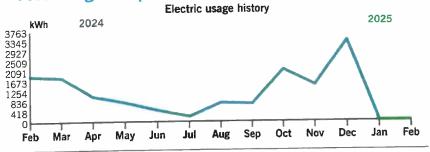
| Total Amount Due Feb 28 | \$33.41 |
|--------------------------|---------|
| Taxes | 3.41 |
| Current Electric Charges | 30.00 |
| Payment Received Jan 29 | -33.41 |
| Previous Amount Due | \$33.41 |



Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 7.2%, Purchased Power 3.8%, Gas 82.7%, Oil 0.1%, Nuclear 0%, Solar 6.2% (For prior 12 months ending December 31, 2024).

Your usage snapshot



Average temperature in degrees

| 52° | 70° | 70° | 79⁰ | 79° | 81° | 8Q° | 80° | 740 | 68° | 63° | 57° | 68° |
|--------|-----------|-------|--------|---------|--------|--------|------|---------|-------|--------|---------|-------|
| | | C | urrent | Month | Feb | 2024 | 12-M | lonth L | Isage | Avg Mo | nthly l | Jsage |
| Electr | ic (kWh) | | 0 | | 1, | 883 | | 12,797 | , | | 1,066 | |
| Avg. [| Daily (kW | h) | 0 | | ļ | 59 | | 35 | | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent h | istory | | | | | | |

Entered:

Approved: LE

Date:

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3125 \$33.41 by Feb 28 Your payment is scheduled to be made by monthly automatic draft on Feb 28

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount of automatic draft

Amount enclosed

032290 000001333 րՍկՍԻՈւտկովիկիՍկիիիինումինիկիկիներունու



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



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duke-energy.com

Your usage snapshot - Continued

| Current electric usage f | Current electric usage for meter number 175400 | | | | | | | |
|-------------------------------|--|---------|--|--|--|--|--|--|
| Actual reading on Feb 5 25980 | | | | | | | | |
| Previous reading on Jan 7 | · | - 25980 | | | | | | |
| Energy Used | | 0 kWh | | | | | | |
| Billed kWh | 0.000 kWh | | | | | | | |

Billing details - Electric

| Billing Period - Jan 07 25 to Feb 05 25 | |
|---|---------|
| Meter - 175400 | |
| Customer Charge | \$17.23 |
| Minimum Bill Adjustment | 12.77 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$3.41 |
|---------------------------|--------|
| County Optional Tax | 0.47 |
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



Your Energy Bill

Service address

LP WATERWORKS INC 234 SHORELINE DR CAMP FL WTR PLANT

Jan 8, 2025 Bill date Dec 5 - Jan 6 For service 33 days

Account number 9100 8906 3125

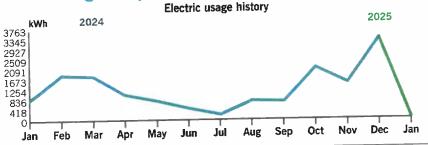
Billing summary

| Total Amount Due Jan 29 | \$33.41 |
|--------------------------|----------|
| Taxes | 3.41 |
| Current Electric Charges | 30.00 |
| Payment Received Dec 27 | -549.82 |
| Previous Amount Due | \$549.82 |



Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 63° | 62° | 70° | 70⁰ | 79° | 79° | 810 | 800 | 800 | 740 | 60- | 03 | 22 | |
|--------|---|-----|-----|-----|-----|------|----------------|--------|-----|-------------------|-------|----|--|
| | | | | | Jan | 2024 | 12-Month Usage | | | Avg Monthly Usage | | | |
| Electr | ic (kWh) | | 0 | | 8 | 74 | | 14,680 |) | ; | 1,223 | | |
| Avg. ۱ | Daily (kW | h) | 0 | | 2 | 28 | | 40 | | | | | |
| 12-m | 12-month usage based on most recent history | | | | | | | | | | | | |

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8906 3125

Account number

500

Amount of automatic draft

\$33.41 by Jan 29

Your payment is scheduled to be made by monthly automatic draft on Jan 29

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

031968 000001227 լվիլիկիների հերևինինին և հերևինինին և հերևինինին և

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

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Your usage snapshot - Continued

| Current electric usage for meter number 175400 | | | | | | | | |
|--|-----------|-------|--|--|--|--|--|--|
| Actual reading on Jan 6 25980 | | | | | | | | |
| Previous reading on Dec | - 25980 | | | | | | | |
| Energy Used | | 0 kWh | | | | | | |
| Billed kWh | 0.000 kWh | | | | | | | |

Billing details - Electric

| Total Current Charges | \$30.0 |
|---|---------|
| Minimum Bill Adjustment | 12.77 |
| Customer Charge | \$17.23 |
| Meter - 175400 | |
| Billing Period - Dec 05 24 to Jan 06 25 | |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$3.41 |
|---------------------------|--------|
| County Optional Tax | 0.47 |
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



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Service address

LP WATERWORKS INC 1535 US HIGHWAY 27 S PUMP CAMPER CORRAL Bill date Jan 8, 2025 For service Dec 5 - Jan 6 33 days

Account number 9100 8906 4168

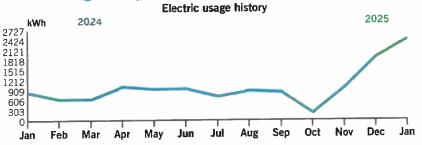
Billing summary

| Total Amount Due Jan 29 | \$381.43 |
|--------------------------|----------|
| Taxes | 38.81 |
| Current Electric Charges | 342.62 |
| Payment Received Dec 27 | -317.95 |
| Previous Amount Due | \$317.95 |



Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80º | 80° | 74° | 68° | 630 | 59° |
|--------|-----------|--------|--------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | С | urrent | Month | Jan | 2024 | 12-N | onth U | sage | Avg Mo | nthly (| Jsage |
| Electr | ic (kWh) | | 2,42 | 24 | 8 | 43 | | 12,044 | | 1 | ,004 | |
| Avg. (| Daily (kW | /h) | 73 | 3 | 2 | 27 | | 33 | | | | |
| 12-m | onth usa | ge bas | sed on | most re | cent h | istory | | | | | | |

Entered:

COA Code:

Approved:

Date: 1/31/25

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 4168

Amount of automatic draft

\$381.43 by Jan 29

Your payment is scheduled to be made by monthly automatic draft on Jan 29

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

032024 000001200 Եվելեննորելիայիսինիկումենիիիներաներինիի



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







| Current electric usage for meter number 2773389 | | | | | | |
|---|---------------|-----------|--|--|--|--|
| Actual reading or | | 69476 | | | | |
| Previous reading | | - 67052 | | | | |
| Energy Used | | 2,424 kWh | | | | |
| Billed kWh | 2,424.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Dec 05 24 to Jan 06 25 | | | | | |
|---|----------|--|--|--|--|
| Meter - 2773389 | | | | | |
| Customer Charge | \$17.23 | | | | |
| Energy Charge | | | | | |
| 2,424.000 kWh @ 9.302c | 225.47 | | | | |
| Fuel Charge | | | | | |
| 2,424.000 kWh @ 3.925c | 95.14 | | | | |
| Asset Securitization Charge | | | | | |
| 2,424.000 kWh @ 0.197c | 4.78 | | | | |
| Total Current Charges | \$342.62 | | | | |

Billing details - Taxes

| Total Taxes | \$38.81 |
|---------------------------|---------|
| County Optional Tax | 5.27 |
| Gross Receipts Tax | 8.79 |
| Regulatory Assessment Fee | 0.30 |
| State And Other Taxes | \$24.45 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



Your Energy Bill

Service address
LP WATERWORKS INC
234 SHORELINE DR

CAMP FL WTR PLANT

Bill date Dec 6, 2024 For service Nov 6 - Dec 4 29 days

Account number 9100 8906 3125

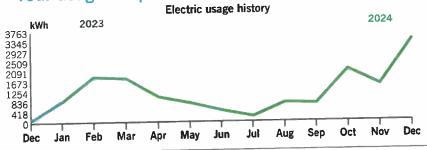
Billing summary

| Total Amount Due Dec 27 | \$549.82 |
|--------------------------|----------|
| Taxes | 55.93 |
| Current Electric Charges | 55.00 |
| | 493.89 |
| Payment Received Dec 02 | -255.44 |
| | 055.44 |
| Previous Amount Due | \$255.44 |

\$

Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 64° | 63° | 62° | 70° | 70° | 79°_ | 79° | 810 | 80° | 80° | 74 | - 00 | |
|--------|-----------|--------|--------|---------|--------|--------|------|---------|------|--------|---------|-------|
| | | C | urrent | Month | Dec | 2023 | 12-N | ionth L | sage | Avg Mo | nthly \ | Jsage |
| Electr | ic (kWh) | | 3,3 | 45 | 8 | 37 | | 15,554 | | | 1,296 | |
| | Daily (kV | | 11 | 5 | | 3 | | 42 | | | | |
| 12-m | onth usa | ige ba | sed on | most re | cent h | istory | | | | | | |

Approved:

Paid: 12/90/24

Date: 13/90/24

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3125

Amount of automatic draft
umber \$549.82 Your paymen

\$549.82 by Dec 27

Your payment is scheduled to be made by monthly automatic draft on Dec 27

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





| Current electric usage for meter number 175400 | | | | | | | |
|--|---------------|-----------|--|--|--|--|--|
| Actual reading on | | 25980 | | | | | |
| Previous reading o | - 22635 | | | | | | |
| Energy Used | | 3,345 kWh | | | | | |
| Billed kWh | 3,345.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Nov 06 24 to Dec 04 24 | |
|---|----------|
| Meter - 175400 | |
| Customer Charge | \$16.02 |
| Energy Charge 3,345.000 kWh @ 9.419c | 315.07 |
| Fuel Charge 3,345.000 kWh @ 4.670c | 156.21 |
| Asset Securitization Charge 3,345.000 kWh @ 0.197c | 6.59 |
| Total Current Charges | \$493.89 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

| Total Taxes | \$55.93 |
|---------------------------|---------|
| County Optional Tax | 7.60 |
| Gross Receipts Tax | 12.67 |
| Regulatory Assessment Fee | 0.43 |
| State And Other Taxes | \$35.23 |



fb.def.duke.bills.20241205201223.25.afp-64081-000001529

29 days

Account number 9100 8906 4168

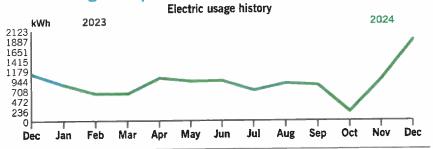
Billing summary

| Total Amount Due Dec 27 | \$317.95 |
|--------------------------|----------|
| Taxes | 32,36 |
| Current Electric Charges | 285.59 |
| Payment Received Dec 02 | -171.80 |
| Previous Amount Due | \$171.80 |



Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 64° | 63° | 62° | 70° | 70° | 79º | 79° | 81° | 80° | 80° | 74° | 68° | 55° |
|--------|-----------|-------|--------|---------|--------|--------|------|---------|------|--------|---------|-------|
| | | C | urrent | Month | Dec | 2023 | 12-M | lonth U | sage | Avg Mo | nthly (| Jsage |
| Electr | ic (kWh) | | 1,8 | 87 | 1,0 | 094 | | 10,463 | | | 872 | |
| Avg. (| Daily (kW | 'h) | 65 | 5 | 3 | 35 | | 29 | | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent h | istory | | | | | | |

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Account number 9100 8906 4168

Amount of automatic draft

\$317.95 by Dec 27

Your payment is scheduled to be made by monthly automatic draft on Dec 27

Add here, to help others with a contribution to Share the Light

Amount enclosed

ույլուկիրիկինների հայերինիկինիկինի իրանակության

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

032041 000001529 իկիկեն ընդեն անականին արդարեր հետարարարեր հետարարարեր հետարարարության հետարարարարության հետարարարարության հետա



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric u | sage for meter number 27733 | 389 |
|--------------------|-----------------------------|-----------|
| Actual reading on | Dec 4 | 67052 |
| Previous reading o | n Nov 6 | - 65165 |
| Energy Used | | 1,887 kWh |
| Billed kWh | 1,887.000 kWh | |

Billing details - Electric

| Billing Period - Nov 06 24 to Dec 04 24 | |
|---|----------|
| Meter - 2773389 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 1,887.000 kWh @ 9.419c | 177.73 |
| Fuel Charge | |
| 1,887.000 kWh @ 4.670c | 88.12 |
| Asset Securitization Charge | |
| 1,887.000 kWh @ 0.197c | 3.72 |
| Total Current Charges | \$285.59 |

Billing details - Taxes

| 4.40 | |
|---------|--------------|
| 7.33 | |
| 0.25 | |
| \$20.38 | |
| | 0.25 7.33 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates





Your Energy Bill

Service address

LP WATERWORKS INC 1535 US HIGHWAY 27 S PUMP CAMPER CORRAL

Nov 7, 2024 Bill date For service Oct 4 - Nov 5

33 days

Account number 9100 8906 4168

Billing summary

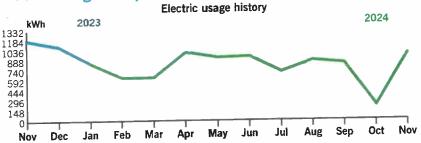
| Total Amount Due Dec 02 | \$171.80 |
|--------------------------|----------|
| Taxes | 17.48 |
| Current Electric Charges | |
| | 154.32 |
| Payment Received Oct 28 | -50.76 |
| Previous Amount Due | \$50.76 |



Thank you for your payment.

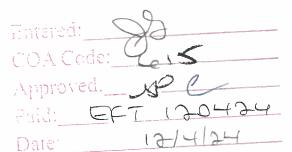
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 69° | 64° | 63° | 62° | 70° | 70° | 79°_ | 79° | 81° | 80° | 803 | /4" | /3° |
|--------|-----------|------|---------|---------|--------|--------|------|---------|-------|--------|-------|-------|
| | | | Current | Month | Nov | 2023 | 12-N | lonth L | Isage | Avg Mo | nthly | Usage |
| Electr | ic (kWh) | | 96 | 8 | 1, | 184 | | 9,670 | | | 806 | |
| | Daily (kW | | 29 | 9 | ; | 39 | | 26 | | | | |
| 12-m | onth usa | ge b | ased on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Amount of automatic draft

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 4168

\$171.80 by Dec 2

Your payment is scheduled to be made by monthly automatic draft on Dec 2

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

032537 000001421 դրկմինիիականընկնիկկկլիոկեկկկրութվիր



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Որուկարկերկարի բերանաների արև





| Tour dange and | | | | | |
|---|-------------|---------|--|--|--|
| Current electric usage for meter number 2773389 | | | | | |
| Actual reading on Nov 5 | | 65165 | | | |
| Previous reading on Oct | | - 64197 | | | |
| Energy Used | | 968 kWh | | | |
| Billed kWh | 968.000 kWh | | | | |

Billing details - Electric

| Billing Period - Oct 04 24 to Nov 05 24 | |
|---|----------|
| Meter - 2773389 | |
| Customer Charge | \$16.02 |
| Energy Charge | 24.40 |
| 968.000 kWh @ 9.419c | 91.18 |
| Fuel Charge | 45.01 |
| 968.000 kWh @ 4.670c | 45.21 |
| Asset Securitization Charge | |
| 968.000 kWh @ 0.197c | 1.91 |
| Total Current Charges | \$154.32 |

Billing details - Taxes

| Total Taxes | \$17.48 |
|---------------------------|---------|
| County Optional Tax | 2.38 |
| Gross Receipts Tax | 3.96 |
| Regulatory Assessment Fee | 0.13 |
| State And Other Taxes | \$11.01 |
| | #11 O1 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



fb.def.duke.bills.20241108221835.53.afp-65029-000001430

duke-energy.com 877.372.8477

Your Energy Bill

Service address LP WATERWORKS INC 234 SHORELINE DR

CAMP FL WTR PLANT

Bill date Nov 7, 2024 Oct 4 - Nov 5 For service 33 days

Account number 9100 8906 3125

Billing summary

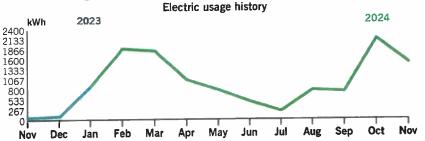
| Total Amount Due Dec 02 | \$255.44 |
|--------------------------|----------|
| Taxes | 25.99 |
| Current Electric Charges | 229.45 |
| Payment Received Oct 28 | -357.09 |
| Previous Amount Due | \$357.09 |



Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 69° | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 814 | 800 | 800 | 74º | 73° |
|---|-----------|-----|--------|-------|-----|------|------|---------|------|--------|---------|-------|
| | | (| urrent | Month | Nov | 2023 | 12-M | lonth U | sage | Avg Mo | nthly \ | Isage |
| Electr | ic (kWh) | | 1,49 | 94 | | 59 | | 12,296 | | 1 | ,025 | |
| Avg. (| Daily (kW | h) | 45 | 5 | | 2 | | 33 | | | | |
| 12-month usage based on most recent history | | | | | | | | | | | | |

Entered: Approved:

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



9100 8906 3125

Account number

Amount of automatic draft

\$255.44 by Dec 2

Your payment is scheduled to be made by monthly automatic draft on Dec 2

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

032515 000001430 <u> Ուվիլիսինում լակնիկիկիկինումիկինիոնոիկին</u>



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

վերիրիկիկներկանիակինիակններինիկիկութիրդնին





| Current electric usage for meter number 175400 | | | | | | | |
|--|---------------|-----------|--|--|--|--|--|
| Actual reading on | 22635 | | | | | | |
| Previous reading o | - 21141 | | | | | | |
| Energy Used | | 1,494 kWh | | | | | |
| Billed kWh | 1,494.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Oct 04 24 to Nov 05 24 | | |
|---|---------|----|
| Meter - 175400 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 1,494.000 kWh @ 9.419c | 140.72 | |
| Fuel Charge | | |
| 1,494.000 kWh @ 4.670c | 69.77 | |
| Asset Securitization Charge | | |
| 1,494.000 kWh @ 0.197c | 2.94 | |
| Total Current Charges | \$229. | 45 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

| Total Taxes | \$25.99 |
|---------------------------|---------|
| County Optional Tax | 3.53 |
| Gross Receipts Tax | 5.89 |
| Regulatory Assessment Fee | 0.20 |
| State And Other Taxes | \$16.37 |



Your Energy Bill

Service address

LP WATERWORKS INC 1535 US HIGHWAY 27 S PUMP CAMPER CORRAL

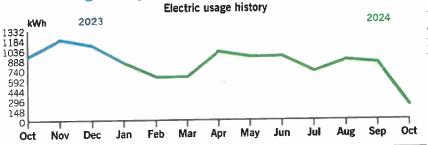
Oct 7, 2024 Bill date For service Sep 6 - Oct 3 28 days

Account number 9100 8906 4168

Billing summary

| Total Amount Due Oct 28 | \$50.76 |
|--------------------------|----------|
| Taxes | 5.16 |
| Current Electric Charges | 45.60 |
| Payment Received Sep 30 | -150.16 |
| Previous Amount Due | \$150.16 |

Your usage snapshot



Average temperature in degrees

| 74° | 69° | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 790 |
|--------|-----------|-------|---------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | (| Current | Month | Oct | 2023 | 12-M | onth U | sage | Avg Mo | nthly (| Jsage |
| Electr | ic (kWh) | | 20 | 7 | 9 | 44 | | 9,886 | | | 824 | |
| Avg. [| Daily (kW | /h) | 7 | | 3 | 33 | | 27 | | | | |
| 12-m | onth usa | ge ba | ised on | most re | cent h | istory | | | | | | |



Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Amount of automatic draft

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number

9100 8906 4168

\$50.76 by Oct 28 Your payment is scheduled to be made by monthly automatic draft on Oct 28

Add here, to help others with a contribution to Share the Light

Amount enclosed

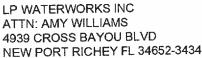
րվետինիիշհղիկնիկիկիներոնիկնկիկինիչի

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

033014 000001458











| I ONI HOUSE OF | | | | | | | | |
|---|-------------|---------|--|--|--|--|--|--|
| Current electric usage for meter number 2773389 | | | | | | | | |
| Actual reading on Oct 3 64197 | | | | | | | | |
| Previous reading on | | - 63990 | | | | | | |
| Energy Used | | 207 kWh | | | | | | |
| Billed kWh | 207.000 kWh | | | | | | | |

Billing details - Electric

| Billing Period - Sep 06 24 to Oct 03 24 | | |
|---|---------|---------|
| Meter - 2773389 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 207.000 kWh @ 9.419c | 19.50 | |
| Fuel Charge | | |
| 207.000 kWh @ 4.670c | 9.67 | |
| Asset Securitization Charge | | |
| 207.000 kWh @ 0.197c | 0.41 | |
| Total Current Charges | | \$45.60 |

Billing details - Taxes

| Total Taxes | \$5.16 |
|---------------------------|--------|
| County Optional Tax | 0.70 |
| Gross Receipts Tax | 1.17 |
| Regulatory Assessment Fee | 0.04 |
| State And Other Taxes | \$3.25 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

fb.def.duke.bills.20241004200816.96.afp-66031-000001458

LP WATERWORKS INC 234 SHORELINE DR CAMP FL WTR PLANT

Oct 7, 2024 Bill date Sep 6 - Oct 3 For service

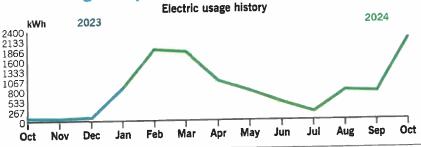
28 days

Account number 9100 8906 3125

Billing summary

| Total Amount Due Oct 28 | \$357.09 |
|--------------------------|----------|
| Taxes | 36.34 |
| Current Electric Charges | 320.75 |
| Payment Received Sep 30 | -134.08 |
| Previous Amount Due | \$134.08 |

Your usage snapshot



Average temperature in degrees

| 74° | 6 9 ° | 64° | 63° | 62° | 70° | 70° | 79° | 790 | 81, | 80" | 9U- | 15 |
|---|--------------|-----|--------|-------|-----|------|------|--------|------|--------|---------|-------|
| | | C | urrent | Month | Oct | 2023 | 12-M | onth U | sage | Avg Mo | nthly (| Jsage |
| Electr | ric (kWh) | | 2,1 | 33 | 7 | 76 | | 0,861 | | | 905 | |
| | Daily (kW | | 76 | 5 | | 3 | | 30 | | | | |
| 12-month usage based on most recent history | | | | | | | | | | | | |

Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Entered:

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number 9100 8906 3125

700

\$357.09 by Oct 28

Your payment is scheduled to be made by monthly automatic draft on Oct 28

Add here, to help others with a contribution to Share the Light

Amount enclosed

րդիոպեսիկութիկարկիրընկություրութիկներութի

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

Amount of automatic draft

033016 000001458

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usage for meter number 175400 | | | | | | | | |
|--|---------------|-----------|--|--|--|--|--|--|
| Actual reading on Oct 3 21141 | | | | | | | | |
| Previous reading o | - 19008 | | | | | | | |
| Energy Used | | 2,133 kWh | | | | | | |
| Billed kWh | 2,133.000 kWh | | | | | | | |

Billing details - Electric .

| Billing Period - Sep 06 24 to Oct 03 24 | |
|---|----------|
| Meter - 175400 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 2,133.000 kWh @ 9.419c | 200.92 |
| Fuel Charge | |
| 2,133.000 kWh @ 4.670c | 99.61 |
| Asset Securitization Charge | |
| 2,133.000 kWh @ 0.197c | 4.20 |
| Total Current Charges | \$320.75 |

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates $\,$

Your current rate is General Service Non-Demand Sec (GS-1).

| Total Taxes | \$36.34 |
|---------------------------|---------|
| County Optional Tax | 4.94 |
| Gross Receipts Tax | 8.23 |
| Regulatory Assessment Fee | 0.28 |
| State And Other Taxes | \$22.89 |



Your Energy Bill

Service address

LP WATERWORKS INC

160 COUNTY ROAD 29 CAMP FL SEWAGE

Bill date

Feb 7, 2025 Jan 7 - Feb 5 For service

30 days

Page 1 of 3

Account number 9100 8906 3901

Billing summary

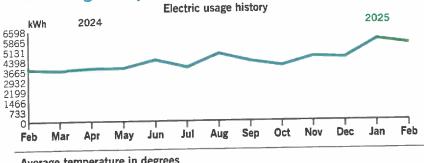
| Total Amount Due Feb 28 | \$615.50 |
|---------------------------|----------|
| Taxes | 62.63 |
| Current Electric Orlanges | 00.00 |
| Current Electric Charges | 552.87 |
| Payment Received Jan 29 | -637.11 |
| | 007.44 |
| Previous Amount Due | \$637.11 |



Thank you for your payment.

Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 7.2%, Purchased Power 3.8%, Gas 82.7%, Oil 0.1%, Nuclear 0%, Solar 6.2% (For prior 12 months ending December 31, 2024).

Your usage snapshot



Average temperature in degrees

| 62° | 70° | 70° | 7 9 ° | 79° | 81° | 80° | 80° | 74° | 68° | 63. | 5/" | 680 |
|--------|-----------|--------|--------------|---------|--------|--------|------|---------|-------|--------|---------|-------|
| | | C | urrent | Month | Feb | 2024 | 12-N | ionth L | Isage | Avg Mo | nthly l | Jsage |
| Electr | ic (kWh) | | 5,5 | 45 | 3, | 786 | ļ | 53,531 | | 2 | 1,461 | |
| Avg. I | Daily (kW | /h) | 18 | 5 | 1 | 18 | | 146 | | | | |
| 12-m | onth usa | ige ba | sed on | most re | cent h | istory | | | | | | |

Date:

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number 9100 8906 3901

Amount of automatic draft

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

> \$615.50 by Feb 28

Your payment is scheduled to be made by monthly automatic draft on Feb 28

\$

greater.

Add here, to help others with a contribution to Share the Light

Amount enclosed

032318 000001325 գորդերերի այլ եր այդ արդարան արդարության արդարան արդարան արդարան արդարան արդարան արդարան արդարան արդարան արդարա

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

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duke-energy.com

Your usage snapshot - Continued

| Current Electric Usage | | |
|------------------------|------------|------------------------|
| Meter Number | Usage Type | Billing Period |
| 177387 | Actual | Jan 7 - Feb 5 |
| Usage Values | | |
| Billed kWh | | 5,545. 32 2 kWh |
| Billed Demand kW | | 10.874 kW |
| Load Factor | | 70.83 % |

Billing details - Electric

| Billing Period - Jan 07 25 to Feb 05 25 | | | | | | |
|---|----------|--|--|--|--|--|
| Meter - 177387 | | | | | | |
| Customer Charge | \$17.75 | | | | | |
| Energy Charge | | | | | | |
| 5,545.322 kWh @ 3.271c | 181.39 | | | | | |
| Fuel Charge | | | | | | |
| 5,545.322 kWh @ 3.925c | 217.65 | | | | | |
| Demand Charge | | | | | | |
| 10.874 kW @ \$11.61 | 126.26 | | | | | |
| Asset Securitization Charge | | | | | | |
| 5,545.322 kWh @ 0.177c | 9.82 | | | | | |
| Total Current Charges | \$552.87 | | | | | |

Billing details - Taxes

| Total Taxes | \$62.6 | | |
|---------------------------|---------|--|--|
| County Optional Tax | 8.51 | | |
| Gross Receipts Tax | 14.19 | | |
| Regulatory Assessment Fee | 0.48 | | |
| State And Other Taxes | \$39.45 | | |

Your current rate is General Service Demand Sec (GSD-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



fb.def.duke.bills.20250129204241.51.afp-34889-000005785

duke-energy.com 877.372.8477

Your Energy Bill

Service address LP WATERWORKS INC 178 SHORELINE DR LIFT CAMP FL

Bill date Jan 30, 2025 For service Dec 27 - Jan 28 33 days

Account number 9100 8906 3670

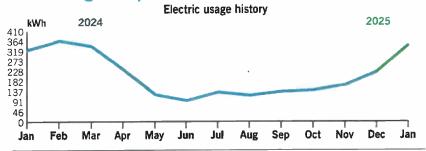
Billing summary

| Total Amount Due Feb 20 | \$70.73 |
|--------------------------|---------|
| Taxes | 7.19 |
| Current Electric Charges | 63.54 |
| Payment Received Jan 21 | -53.45 |
| Previous Amount Due | \$53.45 |



Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 63° | 62° | 70° | 70° | 790 | /90 | 81, | ชนา | 80° | 740 | 98° | 63° | 57° |
|--------|-----------|-------|---------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | (| Current | Month | Jan | 2024 | 12-M | onth U | sage | Avg Mo | nthly L | Isage |
| Electr | ic (kWh) | | 34 | 5 | 3 | 24 | | 2,413 | | | 201 | |
| Avg. [| Daily (kW | h) | 10 |) |] | 11 | | 7 | | | | |
| 12-m | onth usa | ge ba | ised on | most re | cent h | istory | | | | | | |

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number 9100 8906 3670

Amount of automatic draft

\$70.73 by Feb 20 Your payment is scheduled to be made by monthly automatic draft on Feb 20

017445 000005785

Add here, to help others with a contribution to Share the Light

Amount enclosed

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LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







| Current electric usage for meter number 177361 | | | | | |
|--|-------------|---------|--|--|--|
| Actual reading on Ja | 16978 | | | | |
| Previous reading on | - 16633 | | | | |
| Energy Used | | 345 kWh | | | |
| Billed kWh | 345.000 kWh | | | | |

Billing details - Electric

Billing details - Taxes

| Billing Period - Dec 27 24 to Jan 28 25 | |
|---|---------|
| Meter - 177361 | |
| Customer Charge | \$17.23 |
| Energy Charge | |
| 345.000 kWh @ 9.302c | 32.09 |
| Fuel Charge | |
| 345.000 kWh @ 3.925c | 13.54 |
| Asset Securitization Charge | |
| 345.000 kWh @ 0.197c | 0.68 |
| Total Current Charges | \$63.54 |

State And Other Taxes \$4.52 0.06 Regulatory Assessment Fee 1.63 Gross Receipts Tax County Optional Tax 0.98 **Total Taxes** \$7.19

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates



Your Energy Bill

Service address

LP WATERWORKS INC 160 COUNTY ROAD 29 **PUMP**

Bill date Jan 30, 2025 For service Dec 27 - Jan 28 33 days

Page 1 of 3

tb.def.duke,bills.20250129204241.51.afp-34893-000005785

Account number 9100 8906 3480

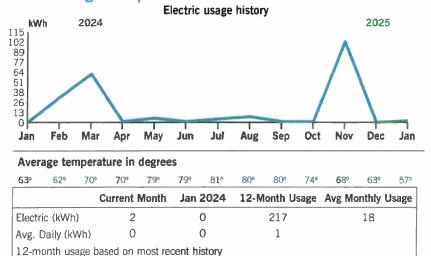
Billing summary

| Total Amount Due Feb 20 | \$33.42 |
|--------------------------|---------|
| Taxes | 3,42 |
| Current Electric Charges | 30.00 |
| Payment Received Jan 21 | -33.40 |
| Previous Amount Due | \$33.40 |



Thank you for your payment.

Your usage snapshot



Approved:___ Paid: Date:

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number 9100 8906 3480

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Amount of automatic draft

\$33.42 by Feb 20 Your payment is scheduled to be made by monthly automatic draft on Feb 20

Add here, to help others with a contribution to Share the Light

Amount enclosed

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

017447 000005785

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usage for meter number 3975234 | | | | | | | |
|---|-----------|-------|--|--|--|--|--|
| Actual reading on Jan | 28 | 386 | | | | | |
| Previous reading on D | | - 384 | | | | | |
| Energy Used | | 2 kWh | | | | | |
| Billed kWh | 2.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Dec 27 24 to Jan 28 25 | | |
|---|---------|---------|
| Meter - 3975234 | | |
| Customer Charge | \$17.23 | |
| Energy Charge | | |
| 2.000 kWh @ 9.302c | 0.19 | |
| Fuel Charge | | |
| 2.000 kWh @ 3.925c | 80.0 | |
| Minimum Bill Adjustment | 12.50 | |
| Total Current Charges | | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

| Total Taxes | \$3.42 |
|---------------------------|--------|
| County Optional Tax | 0.47 |
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.15 |





Service address LP WATERWORKS INC 160 COUNTY ROAD 29

CAMP FL SEWAGE

Bill date For service

Jan 8, 2025 Dec 5 - Jan 6

33 days

b.def.duke.bills.202501**07210010.9**2.afp-63931-000001227

Account number 9100 8906 3901

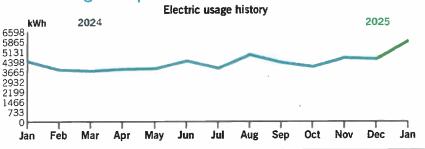
Billing summary

| Total Amount Due Jan 29 | \$637.11 |
|--------------------------|----------|
| Taxes | 64.83 |
| Current Electric Charges | 572.28 |
| Payment Received Dec 27 | -575.84 |
| Previous Amount Due | \$575.84 |



Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 74° | 68° | 63° | 59° |
|--------|-----------|--------|--------|---------|---------|--------|------|--------|------|--------|---------|-------|
| | | С | urrent | Month | Jan | 2024 | 12-M | onth U | sage | Avg Mo | nthly (| Jsage |
| Electr | ic (kWh) | | 5,86 | 55 | 4,4 | 409 | 5 | 51,771 | | 2 | ,314 | |
| Avg. [| Daily (kW | /h) | 178 | 8 | 1 | 42 | | 141 | | | | |
| 12-m | onth usa | ge bas | sed on | most re | cent hi | istory | | | | | | |

Entered:

COA Code:

Approved:

Paid: EFT O13125

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3901

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090 are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Amount of automatic draft

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments

Amount of Zatomatic drai

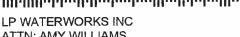
\$637.11 by Jan 29

Your payment is scheduled to be made by monthly automatic draft on Jan 29

Add here, to help others with a contribution to Share the Light

Amount enclosed

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094



ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







Your usage snapshot - Continued

| Current Electric Usage | | |
|------------------------|------------|----------------|
| Meter Number | Usage Type | Billing Period |
| 177387 | Actual | Dec 5 - Jan 6 |
| Usage Values | | |
| Billed kWh | | 5,864.556 kWh |
| Billed Demand kW | | 10.520 kW |
| Load Factor | | 70.39 % |

Billing details - Electric

| Billing Period - Dec 05 24 to Jan 06 25 | |
|---|----------|
| Meter - 177387 | |
| Customer Charge | \$17.75 |
| Energy Charge | |
| 5,864.556 kWh @ 3.271c | 191.83 |
| Fuel Charge | |
| 5,864.556 kWh @ 3.925c | 230.18 |
| Demand Charge | |
| 10.520 kW @ \$11.61 | 122.14 |
| Asset Securitization Charge | |
| 5,864.556 kWh @ 0.177c | 10.38 |
| Total Current Charges | \$572.28 |

Your current rate is General Service Demand Sec (GSD-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$64.83 |
|---------------------------|---------|
| County Optional Tax | 8.81 |
| Gross Receipts Tax | 14.69 |
| Regulatory Assessment Fee | 0.50 |
| State And Other Taxes | \$40.83 |



Your Energy Bill

Page 1 of 3

Service address LP WATERWORKS INC 178 SHORELINE DR LIFT CAMP FL

Bill date Dec 30, 2024 For service Nov 26 - Dec 26 31 days

Account number 9100 8906 3670

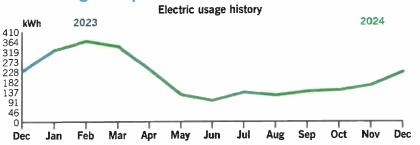
Billing summary

| Total Amount Due Jan 21 | \$53.45 |
|--------------------------|---------|
| Taxes | 5.43 |
| Current Electric Charges | 48.02 |
| Payment Received Dec 18 | -43.91 |
| Previous Amount Due | \$43.91 |



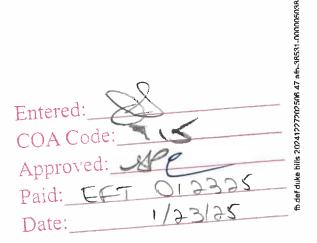
Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 74° | 68° | 62° |
|--------|-----------|-------|---------|---------|--------|--------|------|--------|------|--------|-------|-------|
| | | | Current | Month | Dec | 2023 | 12-M | onth U | sage | Avg Mo | nthly | Usage |
| Electr | ic (kWh |) | 22 | 4 | 2 | 28 | | 2,392 | | | 199 | |
| Avg. [| Daily (kV | ۷h) | 7 | | | 8 | | 7 | | | | |
| 12-m | onth us | age b | ased on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

9100 8906 3670

Account number

Your payment is scheduled to \$53.45 be made by monthly automatic by Jan 21 draft on Jan 21

Amount of automatic draft

Add here, to help others with a contribution to Share the Light

Amount enclosed

019266 000005038 ւ<u>իրինիսիիինսիինիիիիիիինիինիինիինիսիիինի</u>

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





| Current electric usage for meter number 177361 | | | | | | |
|--|-------------|---------|--|--|--|--|
| Actual reading on D | ec 26 | 16633 | | | | |
| Previous reading on | - 16409 | | | | | |
| Energy Used | | 224 kWh | | | | |
| Billed kWh | 224.000 kWh | | | | | |

Billing details - Electric

| Billing Period - Nov 26 24 to Dec 26 24 | | |
|---|---------|---------|
| Meter - 177361 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 224.000 kWh @ 9.419c | 21.10 | |
| Fuel Charge | | |
| 224.000 kWh @ 4.670c | 10.46 | |
| Asset Securitization Charge | | |
| 224.000 kWh @ 0.197c | 0.44 | |
| Total Current Charges | | \$48.02 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$5.43 |
|---------------------------|--------|
| County Optional Tax | 0.74 |
| Gross Receipts Tax | 1.23 |
| Regulatory Assessment Fee | 0.04 |
| State And Other Taxes | \$3.42 |



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duke-energy.com 877.372.8477

Your Energy Bill

Service address

LP WATERWORKS INC 160 COUNTY ROAD 29 **PUMP**

Bill date Dec 30, 2024 For service Nov 26 - Dec 26 31 days

Account number 9100 8906 3480

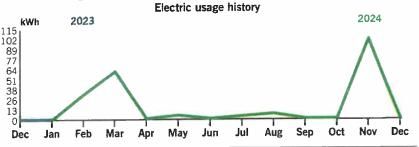
Billing summary

| Total Amount Due Jan 21 | \$33.40 |
|--------------------------|---------|
| Taxes | 3.40 |
| Current Electric Charges | 30.00 |
| Payment Received Dec 18 | -34.04 |
| Previous Amount Due | \$34.04 |



Thank you for your payment.

Your usage snapshot



| Average | temperature | in degrees |
|---------|-------------|------------|
|---------|-------------|------------|

| 64° | 63° | 62° | 70⁰ | 70° | 79° | 79° | 810 | 80° | 80° | 74° | 68° | 62° |
|--------------------|---------|--------|--------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | (| urrent | Month | Dec | 2023 | 12-M | onth L | sage | Avg Mo | nthly (| Jsage |
| Electr | ic (kWh |) | 0 | | | 0 | | 215 | | | 18 | |
| Avg. Daily (kWh) 0 | | | 0 | 1 | | | | | | | | |
| 12-m | onth us | age ba | sed on | most re | cent h | istory | | | | | | |

Date:

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3480 Amount of automatic draft

\$33.40 by Jan 21

Your payment is scheduled to be made by monthly automatic draft on Jan 21

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed

019264 000005038

ւնցիկերի մակիկերի արկրիկ անդաների հետևորին հ

LP WATERWORKS INC ATTN: AMY WILLIAMS

4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434







| Current electric usage for meter number 3975234 | | | | | | | | |
|---|----------------------------|-------|--|--|--|--|--|--|
| Actual reading on Dec 26 384 | | | | | | | | |
| Previous reading on No | Previous reading on Nov 26 | | | | | | | |
| Energy Used | | 0 kWh | | | | | | |
| Billed kWh | 0.000 kWh | | | | | | | |

Billing details - Electric

| Billing Period - Nov 26 24 to Dec 26 24 | |
|---|---------|
| Meter - 3975234 | |
| Customer Charge | \$16.02 |
| Minimum Bill Adjustment | 13.98 |
| Total Current Charges | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

| Total Taxes | \$3.40 |
|---------------------------|--------|
| County Optional Tax | 0.46 |
| Gross Receipts Tax | 0.77 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.14 |



Your Energy Bill

Service address LP WATERWORKS INC 160 COUNTY ROAD 29

CAMP FL SEWAGE

Bill date

Dec 6, 2024

For service Nov 6 - Dec 4

29 davs

b.def.duke.bills.20241205201223.25.afp-64129-000001522

Account number 9100 8906 3901

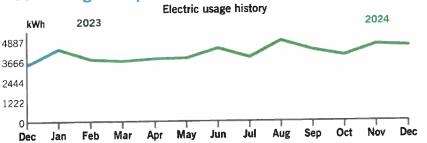
Billing summary

| Total Amount Due Dec 27 | \$575.84 |
|--------------------------|----------|
| Taxes | 58.59 |
| Current Electric Charges | 517.25 |
| Payment Received Dec 02 | -584.19 |
| Previous Amount Due | \$584.19 |



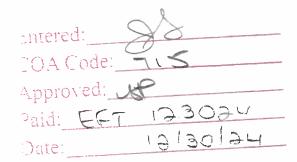
Thank you for your payment.

Your usage snapshot



Average temperature in degrees

| 64° | 63° | 62ª | /0" | 700 | 79~ | 79" | 01. | - 00 | 00 | 7 - | | |
|--------|-----------|-------|--------|---------|--------|--------|------|---------|------|--------|--------|-------|
| | | C | urrent | Month | Dec | 2023 | 12-N | lonth U | sage | Avg Mo | onthly | Usage |
| Electr | ic (kWh) | | 4,5 | 52 | 3,4 | 461 | | 50,316 | | | 4,193 | |
| Avg. I | Daily (kW | 'h) | 15 | 7 | 1 | 12 | | 137 | | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Amount of automatic draft

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3901

\$575.84 by Dec 27

Your payment is scheduled to be made by monthly automatic draft on Dec 27

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

Amount enclosed



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





Your usage snapshot - Continued

| Current Electric Usage | | |
|------------------------|------------|----------------|
| Meter Number | Usage Type | Billing Period |
| 177387 | Actual | Nov 6 - Dec 4 |
| Usage Values | | |
| Billed kWh | | 4,551.915 kWh |
| Billed Demand kW | | 10.498 kW |
| Load Factor | | 62.30 % |

Billing details - Electric

| Billing Period - Nov 06 24 to Dec 04 24 | |
|---|----------|
| Meter - 177387 | |
| Customer Charge | \$16.51 |
| Energy Charge | |
| 4,551.915 kWh @ 3.432c | 156.23 |
| Fuel Charge | |
| 4,551.915 kWh @ 4.670c | 212.57 |
| Demand Charge | |
| 10.498 kW @ \$11.80 | 123.88 |
| Asset Securitization Charge | |
| 4,551.915 kWh @ 0.177c | 8.06 |
| Total Current Charges | \$517.25 |

Your current rate is General Service Demand Sec (GSD-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates $\,$

Billing details - Taxes

| Total Taxes | \$58.59 |
|---------------------------|---------|
| County Optional Tax | 7.97 |
| Gross Receipts Tax | 13.27 |
| Regulatory Assessment Fee | 0.45 |
| State And Other Taxes | \$36.90 |



duke-energy.com 877,372,8477

Your Energy Bill

Service address

LP WATERWORKS INC 178 SHORELINE DR LIFT CAMP FL

Nov 27, 2024 Bill date For service Oct 29 - Nov 25 28 days

Account number 9100 8906 3670

Billing summary

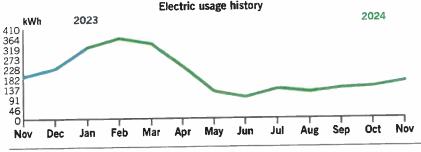
| Total Amount Due Dec 18 | \$43.91 |
|--------------------------|---------|
| Taxes | 4.46 |
| Current Electric Charges | 39.45 |
| Payment Received Nov 20 | -40.26 |
| Previous Amount Due | \$40.26 |



Thank you for your payment.

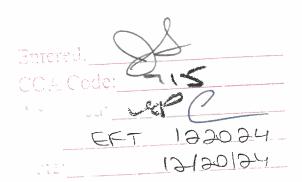
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 69° | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81, | 804 | 80° | 74" | 12 |
|--------|-----------|--------|--------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | С | urrent | Month | Nov | 2023 | 12-M | onth U | sage | Avg Mo | nthly L | Isage |
| Electr | ic (kWh |) | 16 | 4 | 1 | 93 | | 2,396 | | | 200 | |
| Avg. [| Daily (kV | (Vh) | 6 | | | 6 | | 7 | | | | |
| 12-m | onth us | age ba | sed on | most_re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

ույլիիրիիարիարդարարարդիարիարկիարիկիարի

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

9100 8906 3670

Account number

\$43.91

by Dec 18

Your payment is scheduled to be made by monthly automatic draft on Dec 18

Add here, to help others with a contribution to Share the Light

Amount enclosed

017671 000005921



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

Amount of automatic draft



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Your usage snapshot - Continued

| Current electric us | sage for meter number 17736 | 51 |
|---------------------|-----------------------------|---------|
| Actual reading on N | | 16409 |
| Previous reading on | | - 16245 |
| Energy Used | | 164 kWh |
| Billed kWh | 164.000 kWh | |

duke-energy.com 877.372,8477

Billing details - Electric

| Total Current Charges | | \$39.45 |
|---|---------|---------|
| 164.000 kWh @ 0.197c | 0.32 | |
| Asset Securitization Charge | | |
| 164.000 kWh @ 4.670c | 7.66 | |
| Fuel Charge | | |
| 164.000 kWh @ 9.419c | 15.45 | |
| Energy Charge | | |
| Customer Charge | \$16.02 | |
| Meter - 177361 | | |
| Billing Period - Oct 29 24 to Nov 25 24 | | |

Billing details - Taxes

| Total Taxes | \$4.46 |
|---------------------------|--------|
| County Optional Tax | 0.60 |
| Gross Receipts Tax | 1.01 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.82 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

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duke-energy.com 877.372.8477

Your Energy Bill

Service address LP WATERWORKS INC 160 COUNTY ROAD 29 **PUMP**

Bill date Nov 27, 2024 For service Oct 29 - Nov 25 28 days

Account number 9100 8906 3480

Billing summary

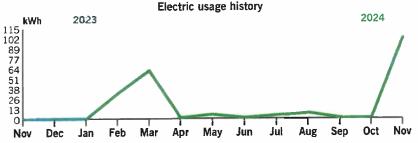
| Total Amount Due Dec 18 | \$34.04 |
|--------------------------|---------|
| Taxes | 3.46 |
| Current Electric Charges | 30.58 |
| Payment Received Nov 20 | -33.40 |
| Previous Amount Due | \$33.40 |



Thank you for your payment.

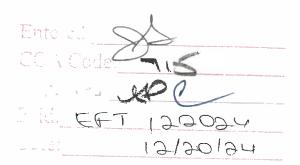
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 69° | 64° | 63° | 62° | 70° | 70° | 79° | /90 | 810 | 800 | 80° | 74° | 120 |
|--------|-----------|-------|---------|---------|--------|--------|------|---------|------|--------|---------|-------|
| | | (| Current | Month | Nov | 2023 | 12-M | ionth U | sage | Avg Mo | nthly L | Jsage |
| Electr | ic (kWh) | | 10 | 2 | | 0 | | 215 | | | 18 | |
| Avg. [| Daily (kW | /h) | 4 | | | 0 | | 1 | | | | |
| 12-m | onth usa | ge ba | ised on | most re | cent h | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Account number

Duke Energy Return Mail PO Box 1090

9100 8906 3480

greater.

Your payment is scheduled to be made by monthly automatic draft on Dec 18

Charlotte, NC 28201-1090

Add here, to help others with a contribution to Share the Light

\$34.04

by Dec 18

Amount of automatic draft

Amount enclosed

017673 000005921

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





duke-energy.com 877.372.8477

Your usage snapshot - Continued

| Current electric usa | ige for meter number 397523 | 4 |
|----------------------|-----------------------------|-----------------|
| Actual reading on No | v 25 | 384 |
| Previous reading on | | - 282 |
| Energy Used | | 102 k Wh |
| Billed kWh | 102.000 kWh | |

Billing details - Electric

| Billing Period - Oct 29 24 to Nov 25 24 | | |
|---|---------|---------|
| Meter - 3975234 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 102.000 kWh @ 9.419c | 9.60 | |
| Fuel Charge | | |
| 102.000 kWh @ 4.670c | 4.76 | |
| Asset Securitization Charge | | |
| 102.000 kWh @ 0.197c | 0.20 | |
| Total Current Charges | ! | \$30.58 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | \$3.46 |
|---------------------------|--------|
| County Optional Tax | 0.47 |
| Gross Receipts Tax | 0.78 |
| Regulatory Assessment Fee | 0.03 |
| State And Other Taxes | \$2.18 |



duke-energy.com 877.372.8477 Your Energy Bill

Service address

LP WATERWORKS INC 160 COUNTY ROAD 29 CAMP FL SEWAGE Bill date Nov 7, 2024 For service Oct 4 - Nov 5

33 days

fb.def.duke.bills.20241106221835.53.afp-85033-000001430

Account number 9100 8906 3901

Billing summary

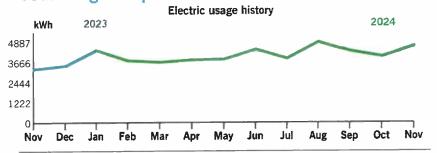
| Total Amount Due Dec 02 | \$584.19 |
|--------------------------|----------|
| Taxes | 59.45 |
| Current Electric Charges | 524.74 |
| Payment Received Oct 28 | -519.50 |
| Previous Amount Due | \$519.50 |



Thank you for your payment.

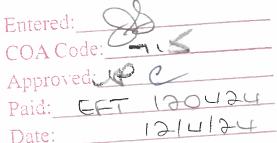
Duke Energy Florida utilized fuel in the following proportions to generate your power: Coal 8.5%, Purchased Power 4.4%, Gas 81.1%, Oil 0.1%, Nuclear 0%, Solar 5.9% (For prior 12 months ending September 30, 2024).

Your usage snapshot



Average temperature in degrees

| 69º | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 74° | 73° |
|---------|-----------|-------|--------|---------|---------|--------|------|--------|------|--------|---------|-------|
| | | C | urrent | Month | Nov | 2023 | 12-M | onth U | sage | Avg Mo | nthly L | Jsage |
| Electri | ic (kWh) | | 4,6 | 47 | 3,2 | 257 | | 19,225 | | 4 | 1,102 | |
| Avg, [| Daily (kW | /h) | 14 | 1 | 1 | 09 | | 134 | | | | |
| 12-m | onth usa | ge ba | sed on | most re | cent hi | istory | | | | | | |



Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

Account number 9100 8906 3901

Amount of automatic draft

\$584.19 by Dec 2

Your payment is scheduled to be made by monthly automatic draft on Dec 2

\$___

Add here, to help others with a contribution to Share the Light

Amount enclosed

վելիիվիկինուկակականինիարդերգիկին

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

032517 000001430 լիզիիոփումինիիկերիիկերիինիկերների

LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





Your usage snapshot - Continued

| Current Electric Usage | | |
|------------------------|------------|----------------|
| Meter Number | Usage Type | Billing Period |
| 177387 | Actual | Oct 4 - Nov 5 |
| Usage Values | | |
| Billed kWh | | 4,646.606 kWh |
| Billed Demand kW | | 10.468 kW |
| Load Factor | | 56.05 % |

Billing details - Electric

| Billing Period - Oct 04 24 to Nov 05 24 | |
|---|----------|
| Meter - 177387 | |
| Customer Charge | \$16.51 |
| Energy Charge | |
| 4,646.606 k Wh @ 3.432c | 159.48 |
| Fuel Charge | |
| 4,646.606 kWh @ 4.670c | 217.00 |
| Demand Charge | |
| 10.468 kW @ \$11.80 | 123.53 |
| Asset Securitization Charge | |
| 4,646.606 kWh @ 0 .177c | 8.22 |
| Total Current Charges | \$524.74 |

Your current rate is General Service Demand Sec (GSD-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$59.45 |
|---------------------------|---------|
| County Optional Tax | 8.08 |
| Gross Receipts Tax | 13.47 |
| Regulatory Assessment Fee | 0.46 |
| State And Other Taxes | \$37.44 |



Your Energy Bill

Bill date

Service address LP WATERWORKS INC 160 COUNTY ROAD 29 **PUMP**

Oct 30, 2024 For service Sep 26 - Oct 28 33 days

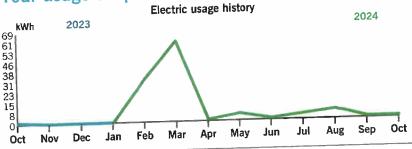
Page 1 of 3

Account number 9100 8906 3480

Billing summary

| Dilling Summers | \$33.40 |
|---|---------|
| Previous Amount Due | -33.40 |
| Payment Received Oct 18 Current Electric Charges | 30.00 |
| | 3.40 |
| Total Amount Due Nov 20 | \$33.40 |

Your usage snapshot



Average temperature in degrees

| 740 | 69° | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 75° |
|---------|---------|---------|---------|---------|--------|--------|------|---------|------|--------|---------|-------|
| / | | C | urrent | Month | Oct | 2023 | 12-N | lonth U | sage | Avg Mo | nthly (| Jsage |
| Electri | c (kWh | 7) | 1 | | | 1 | | 113 | | | 9 | |
| Avg. | | | 0 | } | | 0 . | | 0 | | | | |
| 12-m | onth us | sage ba | ised on | most re | cent h | istory | | | | | | |



Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Account number 9100 8906 3480 Amount of automatic draft

\$33.40 by Nov 20 Your payment is scheduled to be made by monthly automatic draft on Nov 20

Add here, to help others with a contribution to Share the Light

Amount enclosed

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





Your usage snapshot - Continued

| 4 0 000 | | |
|----------------------|-----------------------------|-------|
| Current electric usa | age for meter number 397523 | 34 |
| Actual reading on Oc | | 282 |
| Previous reading on | | - 281 |
| Energy Used | | 1 kWh |
| Billed kWh | 1.000 kWh | |

Billing details - Electric

| Billing Period - Sep 26 24 to Oct 28 24 | | |
|---|---------|---------|
| Meter - 3975234 | | |
| Customer Charge | \$16.02 | |
| Energy Charge | | |
| 1.000 kWh @ 9.419c | 0.08 | |
| Fuel Charge | | |
| 1.000 kWh @ 4.670c | 0.05 | |
| Minimum Bill Adjustment | 13.85 | |
| Total Current Charges | | \$30.00 |

The total charges incurred during this billing period are below the minimum expenses necessary to equitably provide and maintain reliable electric service to all facilities across the state. When the combined monthly customer, energy, fuel, and other charges fall below a \$30 threshold, customers will see the difference noted as a Minimum Bill Adjustment under the Billing Details section. Learn more about the minimum charge adjustment and additional customer charges at duke- energy.com/minimum.

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

Billing details - Taxes

| Total Taxes | | \$3.40 |
|---------------------------|--------|--------|
| County Optional Tax | 0.46 | |
| Gross Receipts Tax | 0.77 | |
| Regulatory Assessment Fee | 0.03 | |
| State And Other Taxes | \$2.14 | |





duke-energy.com 877.372.8477

Service address LP WATERWORKS INC 178 SHORELINE DR

LIFT CAMP FL

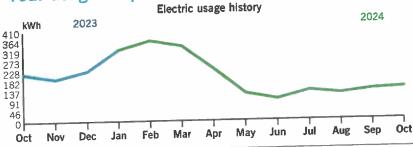
Oct 30, 2024 Bill date For service Sep 26 - Oct 28 33 days

Account number 9100 8906 3670

Billing summary

| Total Amount Due Nov 20 | \$40.26 |
|--------------------------|---------|
| Taxes | 4.10 |
| Current Electric Charges | 36.16 |
| Payment Received Oct 18 | -39.32 |
| Previous Amount Due | \$39.32 |

Your usage snapshot



Average temperature in degrees

| 74º | 69° | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 81° | 80° | 80° | 75° |
|--------|---|-----|--------|-------|-----|------|------|---------|------|--------|---------|-------|
| | | С | urrent | Month | Oct | 2023 | 12-M | lonth U | sage | Avg Mo | nthly L | Isage |
| Electr | ic (kWh) | | 14 | 1 | 2 | 17 | | 2,425 | | | 202 | |
| | Daily (kV | | 4 | | | 7 | | 7 | | | | |
| 12-m | 12-month usage based on most recent history | | | | | | | | | | | |

\$

Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energysavings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Entered: Approved:

pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is

Amount of automatic draft

Mail your payment at least 7 days before the due date or

Please return this portion with your payment. Thank you for your business.



Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090

Account number 9100 8906 3670 \$40.26

by Nov 20

Your payment is scheduled to be made by monthly automatic draft on Nov 20

Add here, to help others with a contribution to Share the Light

Amount enclosed

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

017773 000005944 րմիվինականիրիմիլիայինկականունն



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





Your usage snapshot - Continued

| Current electric usage for meter number 177361 | | | | | | | |
|--|-------------|---------|--|--|--|--|--|
| Actual reading on O | 16245 | | | | | | |
| Previous reading on | - 16104 | | | | | | |
| Energy Used | | 141 kWh | | | | | |
| Billed kWh | 141.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - Sep 26 24 to Oct 28 24 | |
|---|---------|
| Meter - 177361 | |
| Customer Charge | \$16.02 |
| Energy Charge | |
| 141.000 kWh @ 9.419c | 13.28 |
| Fuel Charge | |
| 141.000 kWh @ 4.670c | 6.58 |
| Asset Securitization Charge | • |
| 141.000 kWh @ 0.197c | 0.28 |
| Total Current Charges | \$36.16 |

Billing details - Taxes

| State And Other Taxes | \$2.58 |
|---------------------------|--------|
| Regulatory Assessment Fee | 0.03 |
| Gross Receipts Tax | 0.93 |
| County Optional Tax | 0.56 |
| Total Taxes | \$4.10 |

Your current rate is General Service Non-Demand Sec (GS-1).

For a complete listing of all Florida rates and riders, visit duke-energy.com/rates

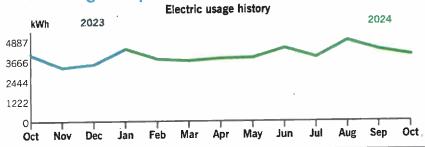
LP WATERWORKS INC 160 COUNTY ROAD 29 CAMP FL SEWAGE Bill date Oct 7, 2024
For service Sep 6 - Oct 3
28 days

Account number 9100 8906 3901

Billing summary

| Total Amount Due Oct 28 | \$519.50 |
|--------------------------|----------|
| Taxes | 52.86 |
| Current Electric Charges | 466.64 |
| Payment Received Sep 30 | -563.71 |
| Previous Amount Due | \$563.71 |

Your usage snapshot



Average temperature in degrees

| 749 69 | 30 | 64° | 63° | 62° | 70° | 70° | 79° | 79° | 810 | 80° | 80° | 790 |
|-------------|-------|------|---------|---------|--------|--------|------|--------|------|--------|---------|-------|
| | | | Current | Month | Oct | 2023 | 12-M | onth U | sage | Avg Mo | nthly l | Jsage |
| Electric (k | (Wh) | | 4,0 | 00 | 4, | 035 | 4 | 17,835 | , | 3 | 3,986 | |
| Avg. Daily | / (kW | /h) | 14 | 3 | 1 | 39 | | 131 | | | | |
| 12-month | i usa | ge b | ased on | most re | cent h | istory | | | | | | |



Thank you for your payment.

Learn how to lower your bill with an online or free on-site Business Energy Check. This no-cost analysis provides you with specific tips on how to save energy and qualify for valuable rebates for energy-savings measures. You may also qualify for a FREE Commercial Energy Savings Kit. Go to duke-energy.com/FreeBizCheck or email prescriptiveincentives@duke-energy.com.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Entered:

COA Code:

Approved:

Paid: EFT 103074

Date: 1013074

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Please return this portion with your payment. Thank you for your business.



Account number 9100 8906 3901

Duke Energy Return Mail PO Box 1090 Charlotte, NC 28201-1090



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434



\$519.50 by Oct 28 Your payment is scheduled to be made by monthly automatic draft on Oct 28

Add here, to help others with a contribution to Share the Light

Amount enclosed

ըհ|իրդինիսիուդ||ենելիիրի||իգեինդովիթիդիդ

Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094





duke-energy.com 877.372.8477

Your usage snapshot - Continued

| Current Electric Usage | | |
|------------------------|------------|------------------------|
| Meter Number | Usage Type | Billing Period |
| 177387 | Actual | Sep 6 - Oct 3 |
| Usage Values | | |
| Billed kWh | | 4,000. 48 6 kWh |
| Billed Demand kW | | 10.080 kW |
| Load Factor | | 59.06 % |

Billing details - Electric

| Billing Period - Sep 06 24 to Oct 03 24 | |
|---|----------|
| Meter - 177387 | |
| Customer Charge | \$16.51 |
| Energy Charge | |
| 4,000.486 kWh @ 3.432c | 137.29 |
| Fuel Charge | |
| 4,000.486 kWh @ 4.670c | 186.82 |
| Demand Charge | |
| 10.080 kW @ \$11.80 | 118.94 |
| Asset Securitization Charge | |
| 4,000.486 kWh @ 0.177c | 7.08 |
| Total Current Charges | \$466.64 |

Your current rate is General Service Demand Sec (GSD-1).

For a complete listing of all Florida rates and riders, visit dukeenergy.com/rates

Billing details - Taxes

| Total Taxes | \$52.86 |
|---------------------------|---------|
| County Optional Tax | 7.18 |
| Gross Receipts Tax | 11.98 |
| Regulatory Assessment Fee | 0.41 |
| State And Other Taxes | \$33.29 |





duke-energy.com 877.372.8477

Your Energy Bill

Service address

LP WATERWORKS INC 178 SHORELINE DR LIFT CAMP FL

Jun 29, 2023 Bill date For service May 26 - Jun 27 33 days

Account number 9100 8906 3670

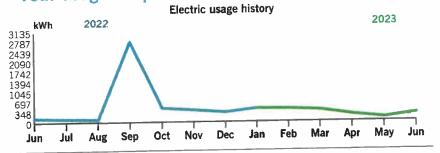
Billing summary

| Total Amount Due Jul 20 | \$65.63 | | |
|--------------------------|---------|--|--|
| Taxes | 6.65 | | |
| Current Electric Charges | 58.98 | | |
| Payment Received Jun 20 | -38.27 | | |
| Previous Amount Due | \$38.27 | | |

Thank you for your payment.

To help us repair malfunctioning streetlights, quickly: 1. Visit dukeenergy.com/lightrepair. 2. Provide us with the light's location and your contact information. 3. Specific addresses, landmarks and directions work best.

Your usage snapshot



Average temperature in degrees

| 79° | 80° | 79° | 77º | 729 | 71° | 64° | 63° | 68° | 69º | 74° | 750 | /8" |
|---------|-----------|-------|---------|---------|--------|--------|------|---------|-------|--------|----------|-------|
| | | (| Current | Month | Jun | 2022 | 12-N | lonth U | Isage | Avg Mo | onthly l | Jsage |
| Electri | ic (kWh) | | 27 | 0 | 1 | 46 | | 6,079 | | | 507 | |
| Avg. D | Daily (kW | h) | 8 | | | 4 | | 17 | | | | |
| 12-m | onth usag | ge ba | sed on | most re | cent h | istory | | | | | | |

Entered: COA Code: Approved:

Mail your payment at least 7 days before the due date or pay instantly at duke-energy.com/billing. Late payments are subject to a \$5.00 or 1.5%, late charge, whichever is greater.

Date:

Please return this portion with your payment. Thank you for your business.



PO Box 1090

Duke Energy Return Mail

Charlotte, NC 28201-1090

9100 8906 3670

Account number

Amount of automatic draft

\$65.63 by Jul 20 Your payment is scheduled to be made by monthly automatic draft on Jul 20

Add here, to help others with a contribution to Share the Light

Amount enclosed

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Duke Energy Payment Processing PO Box 1094 Charlotte, NC 28201-1094

018900 000008085 վայինիարինիկինինինիկիրերերերեր



LP WATERWORKS INC ATTN: AMY WILLIAMS 4939 CROSS BAYOU BLVD NEW PORT RICHEY FL 34652-3434





Your usage snapshot - Continued

| Current electric usage for meter number 177361 | | | | | | | |
|--|-------------|------------------|--|--|--|--|--|
| Actual reading on J Previous reading on | | 13144 - 12874 | | | | | |
| Energy Used | | 270 kWh | | | | | |
| Billed kWh | 270.000 kWh | | | | | | |

Billing details - Electric

| Billing Period - May 26 23 to Jun 27 23 | |
|---|---------|
| Meter - 177361 | |
| Customer Charge | \$15.55 |
| Energy Charge | |
| 270.000 kWh @ 10.278c | 27.75 |
| Fuel Charge | |
| 270.000 kWh @ 5.630c | 15.20 |
| Asset Securitization Charge | |
| 270.000 kWh @ 0.179c | 0.48 |
| Total Current Charges | \$58.9 |

Billing details - Taxes

| Total Taxes | \$6.65 |
|---------------------------|--------|
| County Optional Tax | 0.91 |
| Gross Receipts Tax | 1.51 |
| Regulatory Assessment Fee | 0.04 |
| State And Other Taxes | \$4.19 |

Your current rate is General Service Non-Demand Sec (GS-1).

| PUBLIC WATER SYSTEM INFORMATION (to be con System Name: The Woodlands Plant #1 | mpleted by sampler — please type or print leg | PWS I.D. #: 628-0304 | | | | |
|--|---|---|--|--|--|--|
| System Type (check one): Community Address: 100 Shoreline Dr. | Nontransient Noncommunity | ☐Transient Noncommunity | | | | |
| City: Lake Placid | ZIP Code: | 33852 | | | | |
| Phone # 727-848-8292 Fax #: 727-849-4219 | E-Mail Address; | | | | | |
| SAMPLE INFORMATION (to be completed by sampler) Sample Number: <u>F2402347001</u> Sa | mple Date:4-15-24 | Sample Time: 13:00AM PM (ctrcte One) | | | | |
| Sample Location (be specific) : POE @ WTP 1 | | Location Code: | | | | |
| Disinfectant Residual (Required when reporting results for tril | halomethanes and haloacetic acids): $\frac{1.8}{}$ mg | g/L Field pH: 7.7 | | | | |
| Sample Type (Check Only One) | Reason(s) for Sar | mple (Check all that apply) | | | | |
| Distribution | Routine Compliance with 62-560 | Replacement (of invalidated Sample) | | | | |
| Entry Point (to Distribution) | ☐Confirmation of MCL Exceedance* | ☐Special (not for compliance with 62-550) | | | | |
| Plant Tap (not for compliance with 62-550) | Composite of Multiple Sites** | Clearance (permitting) | | | | |
| Raw (at well or intake) | Other: | | | | | |
| Max Residence Time | Sampling Procedure Used or Other Com | ments: | | | | |
| ☐Ave Residence Time | | | | | | |
| □Near First Customer | Primarys/Seconda | rus/vocs | | | | |
| | *See 62-550.500(8) for requirements and res And 62-550.512(3) for nitrate or nitrite excee | | | | | |
| | SAMPLER CERTIFICATIO | N . | | | | |
| Cj Berish | Lead Operator | . do HERESY CERTIFY | | | | |
| (Print Name) | (Prir | nt Title) | | | | |
| that the above public water system and sample collection in | formation is complete and correct. | | | | | |
| Signature: | Date | _{3:} 4-15-24 | | | | |
| Certified Operator # <u>B28149</u> Phone #: 863-991-18 | 28 | Sampler's Fax #: | | | | |
| Sampler's E-mall: Cjberish@uswatercorp.net | - Vali | this or evit. | | | | |
| Samplers E-mail: 3300000000000000000000000000000000000 | | | | | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name: Advanced Environmental Laboratori | es, Inc. Florida DOH Certification | on #:E84492 | Certification Expiration E | Date: 06/30/2024 |
|--|---|---|---|--|
| Address: 13100 Westlinks Terrace, Unit 10, F | t. Myers, FL 33913 | STTACH CURRENT I | DOH ANALYTE SHEET* 4-8130 | |
| Were any analyses subcontracted Yes | No If yes, please provide | DOH certification nur | mber(s): E84589,E82001 | ,E82574 |
| ANALYSIS INFORMATION (to be completed by | lab) Date Sample(s) Received: | ATTACH DOH ANAL 04/15/2024 | YTE SHEET FOR EACH SU | BCONTRACTED LAB |
| PWS ID: (From Page 1): 6280304 | Sample Number (From Page 1 |): F2402347001 i | _ab Assigned Report # Or | Job ID: F2402347 |
| Group(s) Analyzed & Results attached for comp | oliance with Chapter 62-550, F.A.C | . (Check all that apply): | | |
| Inorganics Synthetic Organics ✓ All except Asbestos All 30 ☐ Partial All Except Dioxin ✓ Nitrate Partial ✓ Nitrite Dioxin Only | Volatile Organics All 21 Partial | sinfection Byproducts Trihalomethanes Haloacetic Acids Chlorite Bromate | Radionuclides Single Sample Qtrly Composite* | Secondaries All 14 Partial |
| Asbestos | LAB CERTIFIC | ATION | | |
| I, Jennifer Mazen (Print Name that all attached analytical data are correct and unles | s noted meet all requirements of the N | Project Manag (Print Title) ational Environmental L | | , do HEREBY CERTIFY |
| Signature: Signature: | | Date: | 05/06/2024 | , |
| Failure to provide a valid and current Florida DOH possible enforcement against the public water sys Please provide radiological sample dates & location | stem for failure to sample, and may res | Analyte Sheet for the a ult in notification of the I | ttached analysis results will i DOH Bureau of Laboratory S | result in rejection of the repor ervices. |
| | FICATION IS REQUIRED WITHIN 24 HRS | | | |
| NON-DETECTS ARE TO BE REPORTED | AS THE MDL WITH "U" QUALIFIER. (N | on-detects reported as "B | DL" or with a "<" are not accepta | ible.) |
| COMPLIANCE DETERMINATION(to be complete | ed by DEP or DOH attach notes as r | ecessary) | | |
| Sample Collection & Analysis Satisfactory: 🔲 Y | es No | Replacement Sample o | Report Requested (circle of | r highlight group(s) above) |
| Person Notified: | Date Notified: | DEP/ | DOH Reviewing Official: | |
| Reporting Format 62-550.730 | Page: 16 | | - | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID:

F2402347001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------|-------|-------|--------------------|------------|----------------------|----------|------------------|------------------|----------------------------|
| 1040 | Nitrate (as N) | 10 | mg/L | 0.023 | U | EPA 300.0 | 0.023 | 04/16/2024 | 13:32 | E84492 |
| 1041 | Nitrite (as N) | 1 | mg/L | 0.018 | U | EPA 300.0 | 0.018 | 04/16/2024 | 13:32 | E84492 |
| 1005 | Arsenic | 0.01 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/17/2024 | 23:57 | E82574 |
| 1010 | Barium | 2 | mg/L | 0.028 | | EPA 200.8 | 0.00050 | 04/17/2024 | 23:57 | E82574 |
| 1015 | Cadmium | 0.005 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/17/2024 | 23:57 | E82574 |
| 1020 | Chromium | 0.1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 04/25/2024 | 09:44 | E84589 |
| 1024 | Cyanide | 0.2 | mg/L | 0.0040 | U | SM 4500-CN-E | 0.0040 | 04/23/2024 | 12:16 | E84589 |
| 1025 | Fluoride | 4 | mg/L | 0.036 | υ | EPA 300.0 | 0.036 | 04/16/2024 | 13:32 | E84492 |
| 1030 | Lead | 0.015 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/17/2024 | 23:57 | E82574 |
| 1035 | Mercury | 0.002 | mg/L | 0.000011 | U | EPA 245.1 | 0.000011 | 04/22/2024 | 13:27 | E84589 |
| 1036 | Nickel | 0.1 | mg/L | 0.0080 | U | EPA 200.7 | 0.0080 | 04/25/2024 | 09:44 | E84589 |
| 1045 | Selenium | 0.05 | mg/L | 0.0012 | υ | EPA 200.8 | 0.0012 | 04/17/2024 | 23:57 | E82574 |
| 1052 | Sodium | 160 | mg/L | 4.9 | | EPA 200.7 | 0.80 | 04/25/2024 | 09:44 | E84589 |
| 1074 | Antimony | 0.006 | mg/L | 0.0010 | Ų | EPA 200.8 | 0.0010 | 04/17/2024 | 23:57 | E82574 |
| 1075 | Beryllium | 0.004 | mg/L | 0.0020 | U | EPA 200.7 | 0.0020 | 04/25/2024 | 09:44 | E84589 |
| 1085 | Thallium | 0.002 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/17/2024 | 23:57 | E82574 |

SECONDARY CONTAMINANTS

62-550.320

Report Number / Job ID: F2402347001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|---------------------------|-----------|---------------|--------------------|------------|----------------------|------------|------------------|------------------|----------------------------|
| 1002 | Aluminum | 0.2 | mg/L | 0.021 | U | EPA 200.7 | 0.021 | 04/25/2024 | 09:44 | E84589 |
| 1017 | Chloride | 250 | m g /L | 13 | | EPA 300,0 | 0.12 | 04/16/2024 | 13:32 | E84492 |
| 1022 | Copper | 1 | mg/L | 0.0033 | I | EPA 200.8 | 0.0010 | 04/18/2024 | 19:20 | E82574 |
| 1025 | Fluoride | 2 | mg/L | 0.036 | U | EPA 300.0 | 0.036 | 04/16/2024 | 13:32 | E84492 |
| 1028 | Iron | 0.3 | mg/L | 0.018 | I | EPA 200.7 | 0.0067 | 04/25/2024 | 09:44 | E84589 |
| 1032 | Manganese | 0.05 | mg/L | 0.0036 | I | EPA 200.8 | 0.0010 | 04/17/2024 | 23:57 | E82574 |
| 1050 | Silver | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/17/2024 | 23:57 | E82574 |
| 1055 | Sulfate | 250 | mg/L | 2.8 | I | EPA 300.0 | 0.076 | 04/16/2024 | 13:32 | E84492 |
| 1095 | Zinc | 5 | mg/L | 0.0063 | I | EPA 200.8 | 0.0060 | 04/17/2024 | 23:57 | E82574 |
| 1905 | Color | 15 | CU | 5.0 | U | SM 2120 B | 5.0 | 04/16/2024 | 16:15 | E84492 |
| 1920 | Odor | 3 | TON | 1.0 | | SM 2150 B | 1.0 | 04/16/2024 | 15:00 | E84492 |
| 1925 | pH (field pH from page 1) | 6.5 - 8.5 | | 7.51 | Q | SM 4500H+B | | 04/16/2024 | 14:42 | E84492 |
| 1930 | Total Dissolved Solids | 500 | mg/L | 180 | | SM 2540 C | 10 | 04/17/2024 | 13:03 | E84492 |
| 2905 | Foaming Agents | 0.5 | mg/L | 0.040 | U | SM 5540 C | 0.040 | 04/17/2024 | 12:00 | E82001 |

VOLATILE ORGANICS 62-550.310(4)(a)

Report Number / Job ID:

F2402347001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL. | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------|-------|-------|--------------------|------------|----------------------|------------|------|------------------|------------------|----------------------------|
| 2378 | 1,2,4-Trichlorobenzene | 70 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2380 | cis-1,2-Dichloroethylene | 70 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2955 | Xylenes (total) | 10000 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2964 | Dichloromethane | 5 | ug/L | 0.44 | Ų | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2968 | o-Dichlorobenzene | 600 | ug/L | 0.39 | U | EPA 524.2 | 0.39 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2969 | para-Dichlorobenzene | 75 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2976 | Vinyl Chloride | 1 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2977 | 1,1-Dichloroethylene | 7 | ug/L | 0.22 | U | EPA 524.2 | 0.22 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2979 | trans-1,2-Dichloroethylene | 100 | ug/L | 0.21 | U | EPA 524.2 | 0.21 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2980 | 1,2-Dichloroethane | 3 | ug/L | 0.24 | U | EPA 524.2 | 0,24 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2981 | 1,1,1-Trichloroethane | 200 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2982 | Carbon tetrachloride | 3 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2983 | 1,2-Dichloropropane | 5 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2984 | Trichloroethylene | 3 | ug/L | 0.14 | U | EPA 524.2 | 0.14 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2985 | 1,1,2-Trichloroethane | 5 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2987 | Tetrachloroethylene | 3 | ug/L | 0.42 | U | EPA 524.2 | 0.42 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2989 | Monochlorobenzene | 100 | ug/L | 0.36 | Ų | EPA 524.2 | 0.36 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2990 | Benzene | 1 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2991 | Toluene | 1000 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2992 | Ethylbenzene | 700 | ug/L | 0.31 | U | EPA 524.2 | 0.31 | 0.5 | 04/20/2024 | 08:27 | E84589 |
| 2996 | Styrene | 100 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 08:27 | E84589 |

Note: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.

| قلق | Environmental Laboratories, Inc. | Fort Myers: 13100 Westinks Terrace, Sts. 10, FL 33913 • 239,674,3130 • Leb ID; E84492 Jacksonville: 6681 Southpoint Plany., FL 32216 • 604,383,3350 • Leb ID; E92574 Tallettassee; 2639 North Montoo SL, Butle D, FL 32303 • 850,218,6274 • Leb ID; E911095 | | | | | | | Gainesy Miramer Tampa: | 10200 UE | | * F 2 | 4 0 | 2 3 | 4 7 : | * | | |
|---|--|---|---------------------|-----------------------|-------------------------|------------------------|------------------------|--|----------------------------------|--|-------------------------------|---------------------|---------------|--------------------------------|--------------------|-----------|--------|------------------------|
| Client Name: US | Water | Project Name: The Woodlands Plant 1 | | BOTTLE SIZE & TYPE | 2x 250P lot 03289011 | Liter AG tot2048007 | 500P HDPE lo2086015 | 250AG kd2048006 | 2 dt | 3x40ml CGV lot2102004 | 1 | | | | | | | |
| Address: 493 | 39 Cross Bayou | Project Number: | DWTP | 62-550 | 4 | | D2 ■ | 2x 28 | Liller | 5007 | 250A 250A | 250P lot 2065014 | 3x40 lot21 | | | | | |
| Ner | w Port Richey,FL | PO Number: | | | | | | n | | | | | | | | | | 吊 |
| Phone: | 727-848-8292 | FDEP Facility No: | 628 | 2000 | 1 | | ANALYSIS REQUIRED | + Hg, | | | | | | | | | | LABORATORY I.D. NUMBER |
| FAX: | 727-849-4219 | FDEP Facility Ad | ir: | | | | 100 E | + | | | | | | | | | | 3 |
| Contact | Tonya Luning | | | | | | SR | etal | et | | | | | | | | | <u>G</u> . |
| Sampled By: | G Berish | Special instruction | AA lot2HL ex0824 | 0129; NaThio i | ok2KJ0410; N | CI 4121070 | LYS | Prim/Sec Metals | Prim/Sec Wet | | 1 40 | | O | | | | | 상 |
| Turn Around Time: | Standard X Rush | HNO3 lol1F2311-01 ex0524; NaOH lolLR11M1 ex0524; NaThjo lot 2KJ0410 ;MCAA lolLR1-1L1 ex0524 | | | njo lat | ANA | m/Se | J/Se | MBAS | Cyanide | | 524 VOC | | | | | 2 | |
| AEL Profile #: | | ADaPT | EQuis | | Other | | | | P | 8 | Ö | ш | 524 | | | | | A A |
| SAMPLE ID | SAMPLE DESCRIPTION | Gral Com | - | MPLING | MATRIX | NO. COUNT | Preservation | N | 1 | 1 | NaOH | 1 | AAHCI | | | | | B |
| POE | Entry to Distribution | Grat | 1 | 13:00 | | | Pleis- Fliered? | | | | <u> </u> | | | | | | |] |
| | | | | | DW | 9 | | X | X | X | X | X | Х | | | | | 001 |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| Received on Ice DCN: AD-D051web Rei | N = wastewater SW = surface water GW = gn Yes No Temp taken from sample Form last revised 08/07/2019 Ilinquished by: Date Time You Bask 1 1-15 /505 | e 🗀 Temp I | rom blank | | re required, | PH checke | ad rique identi | Temp. w fier (circle FC (When I | hen recei IR temp ()R DRI | ved (observed (o | erved) 3 AP J: 9A S WAT | G: LT- ER US | °C Te | 2504) N = emp. when r T: 10A A | ecaived :: 3A N | (comected | d) 3=7 | 7 |
| 3 100 | William 4110 | | | | Attaro | W.Z | | Supplier | of Water. Address: | U.S. | wat | r | ۴. | | | | | |

Altamonte Springs: 390 Northake Blvd., Ste. 1048, FL 32701 - 407.937.1574 - Lab 10: 653076



Advanced Environmental Laboratories, Inc 13100 Westlinks Terrace, Unit 10 Ft. Myers FL 33913 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580 Phone: (239) 674-8130

Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

May 06, 2024

Melisa Rotteveel US Water Services 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: F2402347 The Woodlands Plant 1 62-550

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Monday April 15, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Jennifer Mazen, Project Manager

Simula no mayor

JMazen@aellab.com





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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|-------------|-----------|--------|--------------|------------------|------------------|----------------------|-------|
| F2402347001 | POE | DW | EPA 200.7 | 04/15/2024 13:00 | 04/15/2024 15:05 | 6 | NA |
| F2402347001 | POE | DW | EPA 200.8 | 04/15/2024 13:00 | 04/15/2024 15:05 | 11 | NA |
| F2402347001 | POE | DW | EPA 245.1 | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | EPA 300.0 | 04/15/2024 13:00 | 04/15/2024 15:05 | 5 | NA |
| F2402347001 | POE | DW | EPA 524.2 | 04/15/2024 13:00 | 04/15/2024 15:05 | 21 | NA |
| F2402347001 | POE | WQ | SM 2120 B | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | SM 2150 B | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | SM 2540 C | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | SM 4500-CN-E | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | SM 4500H+B | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |
| F2402347001 | POE | DW | SM 5540 C | 04/15/2024 13:00 | 04/15/2024 15:05 | 1 | NA |

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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

Workorder Summary

Method Comments

COLR-SM-W



Monday, May 6, 2024 9:24:26 AM



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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results Qualifiers

Parameter Qualifiers

- U The compound was analyzed for but not detected.
- 1 The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
- Q Missed Hold Time

Lab Qualifiers

| F | DOH Certification #E84492 (FL NELAC) AEL-Ft. Myers |
|---|---|
| Ġ | DOH Certification #E82001 (FL NELAC) AEL-Gainesville |
| J | DOH Certification #E82574 (FL NELAC) AEL-Jacksonville DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville |
| Τ | DOH Certification #E84589 (FL NELAC) AEL-Tampa |



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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: CVAt/2211

EPA 245.1 Associated Lab IDs: F2402347001

Analysis Method: EPA 245.1

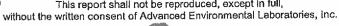
Method Blank(5265371)

Preparation Method:

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|------------|-------|---------|----------|-----|
| Mercury | 0.000011 U | mg/L | 0.00010 | 0.000011 | T |

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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: ICMj/4235

EPA 200.8

Analysis Method: EPA 200.8

Preparation Method: Associ Method Blank(5262436)

| iated | Lab | IDs: | F24023470 |
|-------|-----|------|-----------|
| | | | |

| montos Distintonativos | | | | | |
|------------------------|-----------|-------|--------|---------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| Manganese | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Copper | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Zinc | 0.0060 U | mg/L | 0.024 | 0.0060 | J |
| Arsenic | 0.00025 U | mg/L | 0.0010 | 0.00025 | J |
| Selenium | 0.0012 U | mg/L | 0.0050 | 0.0012 | J |
| Silver | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| Cadmium | 0,00025 U | mg/L | 0.0010 | 0.00025 | J |
| Antimony | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Barium | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| Thallium | 0,00025 U | mg/L | 0.0010 | 0.00025 | J |
| Lead | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| | | - | | | |





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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

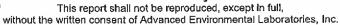
QC Batch: ICPt/4698

EPA 200.7

Preparation Method: Associated Lab IDs: F2402347001 Analysis Method: EPA 200.7

Method Blank(5273885)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|----------------------|---------------|-------|--------|-----|
| Aluminum | 0.021 U | mg/L | 0.10 | 0.021 | Т |
| Beryllium | 0.0020 U | m g/ L | 0.010 | 0.0020 | Т |
| Chromium | 0.0050 U | mg/L | 0.010 | 0.0050 | T |
| Iron | 0.00 67 U | mg/L | 0.10 | 0.0067 | Т |
| Sodium | 0.80 U | mg/L | 1.0 | 0.80 | Т |
| Nickel | 0.0080 U | mg/L | 0.010 | 0.0080 | Т |







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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: MSVt/9071

Preparation Method: EPA 524.2 Associated Lab IDs: F2402347001 Analysis Method: EPA 524.2

| N | oth | ho | Riar | 1k/5 | 268 | 055) |
|-----|-----|------------|------|------|-----|------|
| 173 | eui | u u | D121 | ING | 200 | UJJI |

| Parameter | Results | Units | PQL | MDL | Lab |
|----------------------------|---------|-------|-----|------|------------|
| Vinyl Chloride | 0,29 U | ug/L | 1.0 | 0.29 | |
| 1,1-Dichloroethylene | 0,22 U | ug/L | 1,0 | 0.22 | T^ |
| Methylene Chloride | 0,44 U | ug/L | 1.0 | 0.44 | T^ |
| trans-1,2-Dichloroethylene | 0.21 U | ug/L | 1.0 | 0.21 | Τ^ |
| cis-1,2-Dichloroethylene | 0.27 U | ug/L | 1.0 | 0.27 | T^ |
| 1,2-Dichloroethane | 0.24 U | ug/L | 1.0 | 0.24 | T^ |
| 1,1,1-Trichloroethane | 0.29 U | ug/L | 1.0 | 0.29 | T^ |
| Carbon Tetrachloride | 0.25 U | ug/L | 1.0 | 0.25 | Ţ۸ |
| Benzene | 0.26 U | ug/L | 1.0 | 0.26 | T۸ |
| 1,2-Dichloropropane | 0.26 U | ug/L | 1.0 | 0.26 | T^ |
| Trichloroethene | 0.14 U | ug/L | 1.0 | 0,14 | T^ |
| 1,1,2-Trichloroethane | 0.27 ป | ug/L | 1.0 | 0.27 | T^ |
| Toluene | 0.33 U | ug/L | 1.0 | 0.33 | T^ |
| Tetrachloroethylene (PCE) | 0.42 U | ug/L | 1.0 | 0.42 | T^ |
| Chlorobenzene | 0.36 U | ug/L | 1.0 | 0.36 | T^ |
| Ethylbenzene | 0.31 U | ug/L | 1.0 | 0.31 | T^ |
| Styrene | 0.25 U | ug/L | 1,0 | 0.25 | ^ T |
| 1,4-Dichlorobenzene | 0.33 U | ug/L. | 1.0 | 0.33 | T^ |
| 1,2-Dichlorobenzene | 0,39 U | ug/L | 1.0 | 0.39 | T^ |
| 1,2,4-Trichlarobenzene | 0.44 U | ug/L | 1.0 | 0.44 | T^ |
| Xylene (Total) | 0.44 U | ug/L | 3.0 | 0.44 | T^ |

Surrogates

| Guirogates | | | | | | |
|---------------------------|-------|---------------|--------------|----------------|----------------|-----|
| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
| 1,2-Dichloroethane-d4 (S) | ug/L | 50 | 53 | 107 | 70 - 130 | T |
| Bromofluorobenzene (S) | ug/L | 50 | 56 | 112 | 70 - 130 | Т |
| Toluene-d8 (S) | ug/L | 50 | 54 | 108 | 70 - 130 | Т |

Monday, May 6, 2024 9:24:26 AM Dates and times are displayed using (-04:00) Page 8 of 21 Certificate of Analysis

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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: WCAf/4900

Preparation Method: SM 2540 C Associated Lab IDs: F2402347001 Analysis Method: SM 2540 C

Method Blank(5261134)

| Parameter | Results | Units | PQL | MDL | Lab |
|------------------------|---------|-------|-----|-----|-----|
| Total Dissolved Solids | 10 U | mg/L | 10 | 10 | F |

Monday, May 6, 2024 9:24:26 AM Dates and times are displayed using (-04:00) Page 9 of 21 **Certificate of Analysis**

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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: WCAf/4905

SM 2120 B

Associated Lab IDs: F2402347001

Analysis Method: SM 2120 B

Method Blank(5262183)

Preparation Method:

| Parameter | Results | Units | PQL | MDL | Lab_ |
|-----------|---------|-------|-----|-----|------|
| Color | 5.0 U | PCU | 5.0 | 5.0 | F^ |

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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: WCAf/4920

Preparation Method: EPA 300.0 Associated Lab IDs: F2402347001 Analysis Method: EPA 300.0

| Method | Blank(526453) | 3) |
|--------|---------------|----|

| Michiga Districtory | | | | | |
|---------------------|---------|-------|------|-------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| Fluoride | 0.036 U | mg/L | 0.50 | 0.036 | F |
| Chloride | 0.12 U | mg/L | 5.0 | 0.12 | F |
| Nitrite (as N) | 0.018 U | mg/L | 0.50 | 0.018 | F |
| Nitrate (as N) | 0.023 U | mg/L | 0.50 | 0.023 | F |
| Sulfate | 0,076 U | mg/L | 5.0 | 0.076 | F |

Method Blank(5264535)

| Parameter | Results | Units | PQL | MDL | Lab |
|----------------|---------|-------|------|-------|-----|
| Fluoride | 0.036 U | mg/L | 0.50 | 0.036 | F |
| Chloride | 0.12 U | mg/L | 5.0 | 0.12 | F |
| Nitrite (as N) | 0.018 U | mg/L | 0.50 | 0.018 | F |
| Nitrate (as N) | 0.023 U | mg/L | 0.50 | 0.023 | F |
| Sulfate | 0.076 U | mg/L | 5.0 | 0.076 | F |

POWERED BY HORIZON'





Advanced Environmental Laboratories, Inc. 13100 Westlinks Terrace, Unit 10 Ft. Myers FL 33913 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch:

WCAg/15839

SM 5540 C

Preparation Method: Associated Lab IDs:

F2402347001

Analysis Method:

SM 5540 C

Method Blank(5262930)

| | | | The state of the s | | |
|------------------------|---------|-------|--|-------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| MBAS,as LAS,mol.wt.348 | 0.040 U | mg/L | 0.20 | 0.040 | G |





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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Results

QC Batch: WCAt/29442

Preparation Method: SM 4500-CN-E Associated Lab IDs: F2402347001 Analysis Method: SM 4500-CN-E

Method Blank(5275886)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|----------|-------|-------|--------|-----|
| Cvanide | 0.0040 U | ma/L | 0.010 | 0.0040 | Т |



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FINAL

Workorder: The Woodlands Plant 1 62-550 (F2402347)

QC Cross Reference

| Lab ID | Sample ID | Prep Batch | Prep Method |
|---------------------------|-----------|------------|-------------|
| CVAt/2211 - EPA 245.1 | | | |
| F2402347001 | POE | DGMt/7628 | EPA 245.1 |
| ICMj/4235 - EPA 200.8 | | | |
| F2402347001 | POE | | |
| ICPt/4698 - EPA 200.7 | | | |
| F2402347001 | POE | | |
| MSVt/9071 - EPA 524.2 | | | |
| F2402347001 | POE | | |
| WCA#4887 - SM 2150 B | | | |
| F2402347001 | POE | | |
| WCAf/4900 - SM 2540 C | | | |
| F2402347001 | POE | | |
| WCAf/4905 - SM 2120 B | | | |
| F2402347001 | POE | | |
| WCAf/4915 - SM 4500H+B | | | |
| F2402347001 | POE | | |
| WCA†/4920 - EPA 300.0 | | | |
| F2402347001 | POE | | |
| WCAg/15839 - SM 5540 C | | | |
| F2402347001 | POE | | |
| WCAt/29442 - SM 4500-CN-E | | | |
| F2402347001 | POE | | |



| PUBLIC WATER SYSTEM INFORMATION (to be System Name: The Woodlands Plant #2 | o completed by sampler - please type or print legil | PWS I.D. #: <u>628-0304</u> | | | |
|--|--|--|--|--|--|
| System Type (check one): © Community Address: 5 Hidden Cove. | Nontransient Noncommunity | Transiant Noncommunity | | | |
| Lake Placid | ZiP Code: | 33852 | | | |
| Oily. | 219 E Mail Address: | | | | |
| Phone # 727-848-8292 Fax #: 727-849-4 | E-lyton Mudicos. | | | | |
| SAMPLE INFORMATION (to be completed by sams Sample Number: F2402348001 | pler) Sample Date: <u>4-15-24</u> | Sample Time: 13:30AM PM (Circle One) | | | |
| Sample Location (he specific) . POE @ WTP 2 | | Location Code: | | | |
| Disinfectant Residual (Required when reporting results for trihalomethenes and haloacetic acids): 1.5 mg/L Field pH: 7.6 | | | | | |
| Sample Type (Check Only One) Reason(s) for Sample (Check all that apply) | | | | | |
| Distribution | Routine Compliance with 62-550 | Replacement (of Invalidated Sample) | | | |
| Entry Point (to Distribution) | Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) | | | |
| ☐Plant Tap (not for compliance with 62-550) | Composite of Multiple Sites** | Clearanca (permitting) | | | |
| Rew (at well or intake) | Other: | | | | |
| ☐Max Residence Time Sampling Procedure Used or Other Comments: | | | | | |
| ☐Ave Residence Time | | and there | | | |
| □Near First Customer | <u>Primary's/Secondar</u> | | | | |
| _ | "See 62-550.600(6) for requirements and res And 62-550.612(3) for nitrale or nitrite excess | strictions. **See 62-550.550(4) for requirements and edences. attach a results page for each site. | | | |
| SAMPLER CERTIFICATION | | | | | |
| Ci Berich | Lead Operator | , do HEREBY CERTIFY | | | |
| I, Cj Berish (Print Name) | (Pr | Int Title) | | | |
| that the above public water system and sample collect | ction information is complete and correct. | | | | |
| attactio above passes trace system as a | | 4-15-24 | | | |
| Signature: | | [8: | | | |
| Certified Operator #_B28149 Phone #: 863-9 | mpler's Fax#: | | | | |
| Sampler's E-mail: Cjberish@uswatercorp.net | | | | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name: Advanced Environmental Laboratories | s, Inc. Florida DOH Certificat | tion #:E84492 | Certification Expiration D | ate: 06/30/2024 |
|--|--------------------------------------|---|---|--|
| | | ATTACH CURRENT D | OH ANALYTE SHEET* | |
| Address: 13100 Westlinks Terrace, Unit 10, Ft. | Myers, FL 33913 | Phone #: (239) 674 | -8130 | |
| Were any analyses subcontracted Yes | No If yes, please provide | e DOH certification num | ber(s): E84589,E82001, | E82574 |
| | | ATTACH DOH ANALY | TE SHEET FOR EACH SUI | BCONTRACTED LAB |
| ANALYSIS INFORMATION (to be completed by la | b) Date Sample(s) Received: | 04/15/2024 | | |
| PWS ID: (From Page 1): 6280304 | Sample Number (From Page | 1): F2402348001 La | ab Assigned Report # Or | Job ID: <u>F2402348</u> |
| Group(s) Analyzed & Results attached for compli | ance with Chapter 62-550, F.A. | C. (Check all that apply): | | |
| Inorganics Synthetic Organics ✓ All except Asbestos ☐ All 30 ☐ Partial ☐ All Except Dioxin ✓ Nitrate ☐ Partial ✓ Nitrite ☐ Dioxin Only | Volatile Organics All 21 Partial | Disinfection Byproducts Trihalomethanes Haloacetic Acids Chlorite Bromate | Radionuclides Single Sample Otrly Composite* | Secondaries All 14 Partial |
| Asbestos | LAB CERTIFIC | CATION | | |
| I, Jennifer Mazen | 1 | Project Manage | эг | , do HEREBY CERTIFY |
| (Print Name | | (Print Title) | | |
| that all attached analytical data are correct and unless | noted meet all requirements of the | National Environmental La | boratory Accreditation Conf | erence (NELAC). |
| Signature: Service 11 Mary 11 | | Date: | 05/06/2024 | |
| * Failure to provide a valid and current Florida DOH II possible enforcement against the public water system ** Please provide radiological sample dates & location | em for failure to sample, and may re | nt Analyte Sheet for the att sult in notification of the D | tached analysis results will r OH Bureau of Laboratory S | esult in rejection of the report ervices. |
| | CATION IS REQUIRED WITHIN 24 HRS | | | |
| NON-DETECTS ARE TO BE REPORTED A | S THE MDL WITH "U" QUALIFIER. | (Non-detects reported as "BD | L" or with a "<" are not accepta | ble.) |
| COMPLIANCE DETERMINATION(to be completed | l by DEP or DOH – attach notes as | necessary) | | |
| Sample Collection & Analysis Satisfactory: Ye | s No | Replacement Sample or | Report Requested (circle or | highlight group(s) above) |
| Person Notified: | Date Notified: | DEP/C | OOH Reviewing Official:_ | |
| Reporting Formal 62-550.730 Effective January 1995, Revised December 2012 | Page: | 16 of 21 | | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

INORGANIC CONTAMINANTS 62-550.310(1)

Report Number / Job ID:

F2402348001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------|-------|-------|--------------------|------------|----------------------|----------|------------------|------------------|----------------------------|
| 1040 | Nitrate (as N) | 10 | mg/L | 0.070 | I | EPA 300.0 | 0.023 | 04/16/2024 | 13:46 | E84492 |
| 1041 | Nitrite (as N) | 1 | mg/L | 0.018 | U | EPA 300.0 | 0.018 | 04/16/2024 | 13:46 | E84492 |
| 1005 | Arsenic | 0.01 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/18/2024 | 00:03 | E82574 |
| 1010 | Barium | 2 | mg/L | 0.014 | | EPA 200.8 | 0.00050 | 04/18/2024 | 00:03 | E82574 |
| 1015 | Cadmium | 0.005 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/18/2024 | 00:03 | E82574 |
| 1020 | Chromium | 0.1 | mg/L | 0.0050 | U | EPA 200.7 | 0.0050 | 04/25/2024 | 09:46 | E84589 |
| 1024 | Cyanide | 0.2 | mg/L | 0.0040 | U | SM 4500-CN-E | 0.0040 | 04/23/2024 | 12:18 | E84589 |
| 1025 | Fluoride | 4 | mg/L | 0.036 | U | EPA 300.0 | 0.036 | 04/16/2024 | 13:46 | E84492 |
| 1030 | Lead | 0.015 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/18/2024 | 00:03 | E82574 |
| 1035 | Mercury | 0.002 | mg/L | 0.000011 | U | EPA 245.1 | 0.000011 | 04/22/2024 | 13:30 | E84589 |
| 1036 | Nickel | 0.1 | mg/L | 0.0080 | U | EPA 200.7 | 0.0080 | 04/25/2024 | 09:46 | E84589 |
| 1045 | Selenium | 0.05 | mg/L | 0.0012 | U | EPA 200.8 | 0.0012 | 04/18/2024 | 00:03 | E82574 |
| 1052 | Sodium | 160 | mg/L | 4.7 | | EPA 200.7 | 0.80 | 04/25/2024 | 09:46 | E84589 |
| 1074 | Antimony | 0.006 | mg/L | 0.0010 | U | EPA 200.8 | 0.0010 | 04/18/2024 | 00:03 | E82574 |
| 1075 | Beryllium | 0.004 | mg/L | 0.0020 | U | EPA 200.7 | 0.0020 | 04/25/2024 | 09:46 | E84589 |
| 1085 | Thallium | 0.002 | mg/L | 0.00025 | U | EPA 200.8 | 0.00025 | 04/18/2024 | 00:03 | E82574 |

SECONDARY CONTAMINANTS 62-550.320

Report Number / Job ID:

F2402348001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|---------------------------|-----------|-------|--------------------|------------|----------------------|------------|------------------|------------------|----------------------------|
| 1002 | Aluminum | 0.2 | mg/L | 0.021 | U | EPA 200.7 | 0.021 | 04/25/2024 | 09:46 | E84589 |
| 1017 | Chloride | 250 | mg/L | 12 | | EPA 300.0 | 0.12 | 04/16/2024 | 13:46 | E84492 |
| 1022 | Copper | 1 | mg/L | 0.0026 | I | EPA 200.8 | 0.0010 | 04/18/2024 | 19:26 | E82574 |
| 1025 | Fluoride | 2 | mg/L | 0.036 | U | EPA 300.0 | 0.036 | 04/16/2024 | 13:46 | E84492 |
| 1028 | Iron | 0.3 | mg/L | 0.058 | I | EPA 200.7 | 0.0067 | 04/25/2024 | 09:46 | E84589 |
| 1032 | Manganese | 0.05 | mg/L | 0.0025 | I | EPA 200.8 | 0.0010 | 04/18/2024 | 00:03 | E82574 |
| 1050 | Silver | 0.1 | mg/L | 0.00050 | U | EPA 200.8 | 0.00050 | 04/18/2024 | 00:03 | E82574 |
| 1055 | Sulfate | 250 | mg/L | 2.2 | I | EPA 300.0 | 0.076 | 04/16/2024 | 13:46 | E84492 |
| 1095 | Zinc | 5 | mg/L | 0.0093 | I | EPA 200.8 | 0.0060 | 04/18/2024 | 00:03 | E82574 |
| 1905 | Color | 15 | CU | 5.0 | U | SM 2120 B | 5.0 | 04/16/2024 | 16:15 | E84492 |
| 1920 | Odor | 3 | TON | 1.0 | U | SM 2150 B | 1.0 | 04/16/2024 | 15:00 | E84492 |
| 1925 | pH (field pH from page 1) | 6.5 - 8.5 | | 7.02 | Q | SM 4500H+B | | 04/16/2024 | 14:42 | E84492 |
| 1930 | Total Dissolved Solids | 500 | mg/L | 120 | | SM 2540 C | 10 | 04/17/2024 | 13:03 | E84492 |
| 2905 | Foaming Agents | 0.5 | mg/L | 0.040 | U | SM 5540 C | 0.040 | 04/17/2024 | 12:00 | E82001 |

VOLATILE ORGANICS 62-550.310(4)(a)

Report Number / Job ID:

F2402348001

PWS ID (From Page 1):

6280304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------|-------|-------|--------------------|------------|----------------------|------------|-----|------------------|------------------|----------------------------|
| 2378 | 1,2,4-Trichlorobenzene | 70 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2380 | cis-1,2-Dichloroethylene | 70 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2955 | Xylenes (total) | 10000 | ug/L | 0.44 | Ü | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2964 | Dichloromethane | 5 | ug/L | 0.44 | U | EPA 524.2 | 0.44 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2968 | o-Dichlorobenzene | 600 | ug/L | 0.39 | U | EPA 524.2 | 0.39 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2969 | para-Dichlorobenzene | 75 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2976 | Vinyl Chloride | 1 | ug/L | 0.29 | U | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2977 | 1,1-Dichloroethylene | 7 | ug/L | 0.22 | U | EPA 524.2 | 0.22 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2979 | trans-1,2-Dichloroethylene | 100 | ug/L | 0.21 | U | EPA 524.2 | 0.21 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2980 | 1,2-Dichloroethane | 3 | ug/L | 0.24 | U | EPA 524.2 | 0.24 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2981 | 1,1,1-Trichloroethane | 200 | ug/L | 0.29 | Ų | EPA 524.2 | 0.29 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2982 | Carbon tetrachloride | 3 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2983 | 1,2-Dichloropropane | 5 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2984 | Trichloroethylene | 3 | ug/L | 0.14 | U | EPA 524.2 | 0.14 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2985 | 1,1,2-Trichloroethane | 5 | ug/L | 0.27 | U | EPA 524.2 | 0.27 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2987 | Tetrachloroethylene | 3 | ug/L | 0.42 | U | EPA 524.2 | 0.42 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2989 | Monochlorobenzene | 100 | ug/L | 0.36 | Ü | EPA 524.2 | 0.36 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2990 | Benzene | 1 | ug/L | 0.26 | U | EPA 524.2 | 0.26 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2991 | Toluene | 1000 | ug/L | 0.33 | U | EPA 524.2 | 0.33 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2992 | Ethylbenzene | 700 | ug/L | 0.31 | U | EPA 524.2 | 0.31 | 0.5 | 04/20/2024 | 08:52 | E84589 |
| 2996 | Styrene | 100 | ug/L | 0.25 | U | EPA 524.2 | 0.25 | 0.5 | 04/20/2024 | 08:52 | E84589 |

Note: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.

| (| Advanced Environmental Laboratories, Inc. |
|--------------|--|
| Client Name: | US Water |
| | 1000.0 |

| Œ | Advanced Environmental l | aboratories, Inc | Fort A | Avers; 13 Ionylile; | 100 Westloks 1 8681 Southpoin | oriniake Blvd., Sk Terraca, Sta. 10, I Il Picky., FL 3221 me St., Sulte D, I | FL 33913 • 239, 6 • 904,353,935 | 674.8130 • Lab 0 • Lab 10: E82 | ID: E84492 574 | 3076 | | |]Galnesy]Miramar]Tampa: | 10200 US | | | 2 4 0 | 2 3 | 4 8 | * |
|-------------------|--|------------------|--------------------------|------------------------|----------------------------------|---|------------------------------------|-----------------------------------|------------------------|---------------------------------|---|--|---------------------------------|-------------------------------|--------------------------|---------|----------|----------|-----------|------------------------|
| Client Name: US | Water | | Project Nan | NO: | The Wo | odlands | Plant 2 | | BOTTLE SIZE & TYPE | ± ± 0 | 200 | OPE 015 | 900 | _ 4 | | | 1 | 1 | 1 | 1 |
| Address: 48 | 39 Cross Bayou | | Project Nun | nber: | DWTP | 62-550 | | | BOTTL L.A | 2x 250P lot 03289011 | Liter AG lot2048007 | 500P HDPE (0/2066015 | 250AG lot2048006 | 250P lot 2058014 | 3x40ml CGV lot2102004 | | | | | |
| Ne | w Port Richey,FL | *** | PO Number | rt | | | | | | | | 4,2 | (4.2 | 44 | 60.22 | | | | 1 | 1 24 |
| Phone: | 727-848-8292 | | FOEP Facil | ilty No: | 678 | 030 - | 1 | | ANALYSIS REQUIRED | Hg, U | | | | | | | | | | ABE |
| FAX: | 727-849-4219 | | FDEP Fec | filly Addr. | | | | | ฏิ | + | | | | | | | | | | 15 |
| Sontact: | Tonya Luning | | | | | | | | S | etals | 盂 | | | | | | | | | 0 |
| Sampled By: | 43 Berish | | Special ins | skuctions: | AA lot2HL0 mx0824 | 129; NaThio II | 012KJ0410; H | CI 4121070 | XS. | Prim/Sec Metals | Prim/Sec Wet | | | | O | | | | | ∑ |
| Turn Around Time: | Standard >> | Rush | HNQ3 lbt1F 2KJ0410 ;h | 2311-01 e | x0524; NeO: R1-1L1 ex08 | H loLLR11M1 : 24 | ex0624; NaTi | hio lat | MA | n/Se | aS/u | 4S | Cyanide | | Voc | | | | | G |
| AEL Profile #: | | | ADaPT | | EQuis | | Other | | | Prin | F | MBAS | Cya | L | 624 | | | | | ₹ |
| SAMPLE ID | SAMPLE D | ESCRIPTION | | Grab Comp | DATE | PLING | MATRIX | NO. | Preservation Plaid- | N | I | 1 | NaOH | 1 | AA-HCI | | | | | LABORATORY I.D. NUMBER |
| POE | Entry to Distributio | n | - | Grab | 4-15 | 13:30 | DW | 9 | Ptiered7 | X | X | х | X | X | X | | | - | _ | + |
| | | | | | | | | | | | | | | | | | | | · | 001 |
| | | | | | | | | | | | | | | | | | | | | |
| | V=wastewater SW=surfa | ce water GW = gr | | | rinking wat | | A=air & | | | | Preserva | tion Cod | e: 1 = ice | • H=(HCl |) S=(H | 2504) N | × (HNO3) |) T= (S: | odium Thi | osulfate; |
| CN: AD-D051web | Form last revised 08/07/20 inquished by: 0 | • | - | | | e used for n | | emp by un | Ique identif | ier (circle l FO: (When P | R temp g R DRII WS Informa t Persons | WKING MKING Microrator Micr | J: 9A WATE thorwise su | G: LT-1 ER US pplied) P | LT-2 E: | T: 10A | A: 3A M | ME BA | ld) S+ | 1A) |
| 4 | | | | | | | | | - 1 | | Address | | | | | | | | | |



Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

May 06, 2024

Melisa Rotteveel US Water Services 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: F2402348 The Woodlands Plant 2 62-550

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Monday April 15, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Jennifer Mazen, Project Manager

Sennya m mayor

JMazen@aellab.com





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|-------------|-----------|--------|--------------|------------------|------------------|----------------------|-------|
| F2402348001 | POE | DW | EPA 200.7 | 04/15/2024 13:30 | 04/15/2024 15:05 | 6 | NA |
| F2402348001 | POE | DW | EPA 200.8 | 04/15/2024 13:30 | 04/15/2024 15:05 | 11 | NA |
| F2402348001 | POE | DW | EPA 245.1 | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | EPA 300.0 | 04/15/2024 13:30 | 04/15/2024 15:05 | 5 | NA |
| F2402348001 | POE | DW | EPA 524.2 | 04/15/2024 13:30 | 04/15/2024 15:05 | 21 | NA |
| F2402348001 | POE | DW | SM 2120 B | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | SM 2150 B | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | SM 2540 C | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | SM 4500-CN-E | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | SM 4500H+B | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |
| F2402348001 | POE | DW | SM 5540 C | 04/15/2024 13:30 | 04/15/2024 15:05 | 1 | NA |



Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

Workorder Summary

Method Comments

COLR-SM-W



Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results Qualifiers

Parameter Qualifiers

U The compound was analyzed for but not detected.

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

Q Missed Hold Time

Lab Qualifiers

| F | DOH Certification #E84492 (FL NELAC) AEL-Ft. Myers |
|---|---|
| G | DOH Certification #E82001 (FL NELAC) AEL-Gainesville |
| J | DOH Certification #E82574 (FL NELAC) AEL-Jacksonville DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville |
| Т | DOH Certification #E84589 (FL NELAC) AFL-Tampa |





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch:

CVAt/2211

EPA 245.1

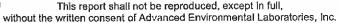
Preparation Method: Associated Lab IDs:

F2402348001

Analysis Method: EPA 245.1

Method Blank(5265371)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|------------|-------|---------|----------|-----|
| Mercury | 0.000011 U | mg/L | 0.00010 | 0.000011 | Т |







Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch:

ICMj/4235

Analysis Method: EPA 200.8

Preparation Method:

EPA 200.8

Associated Lab IDs: F2402348001

Method Blank(5262436)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|-----------|-------|--------|---------|-----|
| Manganese | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Copper | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Zinc | 0,0060 U | mg/L | 0.024 | 0.0060 | J |
| Arsenic | 0.00025 U | mg/L | 0.0010 | 0.00025 | J |
| Selenium | 0.0012 U | mg/L | 0.0050 | 0.0012 | J |
| Silver | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| Cadmium | 0.00025 U | mg/L | 0.0010 | 0.00025 | J |
| Antimony | 0.0010 U | mg/L | 0.0040 | 0.0010 | J |
| Barium | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| Thallium | 0.00025 U | mg/L | 0.0010 | 0.00025 | J |
| Lead | 0.00050 U | mg/L | 0.0020 | 0.00050 | J |
| | | | | | |





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch:

ICPt/4698

EPA 200.7

Preparation Method: Associated Lab IDs: F2402348001

Analysis Method: EPA 200.7

Method Blank(5273885)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|----------|-------|-------|--------|-----|
| Aluminum | 0.021 U | mg/L | 0.10 | 0,021 | Т |
| Beryllium | 0.0020 U | mg/L | 0.010 | 0,0020 | Ŧ |
| Chromium | 0,0050 U | mg/L | 0.010 | 0.0050 | τ |
| Iron | 0.0067 U | mg/L | 0.10 | 0.0067 | T |
| Sodium | 0.80 U | mg/L | 1.0 | 0.80 | Υ |
| Nickel | 0.0080 U | mg/L | 0.010 | 0.0080 | Т |





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch: MSVt/9071

Analysis Method: EPA 524.2

Preparation Method: EPA 524.2

Associated Lab IDs: F2402348001

| ethod Blank(5268055) | | | | | | | | |
|----------------------------|---------|-------|-----|------|-----|--|--|--|
| Parameter | Results | Units | PQL | MDL | Lab | | | |
| Vinyl Chloride | 0.29 U | ug/L | 1.0 | 0.29 | T^ | | | |
| 1,1-Dichloroethylene | 0.22 U | ug/L | 1.0 | 0.22 | T^ | | | |
| Methylene Chloride | 0.44 U | ug/L | 1.0 | 0.44 | T^ | | | |
| trans-1,2-Dichloroethylene | 0.21 U | ug/L | 1.0 | 0.21 | T^ | | | |
| cis-1,2-Dichloroethylene | 0.27 U | ug/L | 1.0 | 0.27 | T^ | | | |
| 1,2-Dichloroethane | 0,24 U | ug/L | 1.0 | 0.24 | T^ | | | |
| 1,1,1-Trichloroethane | 0.29 U | ug/L | 1.0 | 0.29 | T^ | | | |
| Carbon Tetrachloride | 0.25 U | ug/L | 1.0 | 0.25 | T^ | | | |
| Benzene | 0.26 U | ug/L | 1.0 | 0.26 | T^ | | | |
| 1,2-Dichloropropane | 0.26 U | ug/L | 1.0 | 0.26 | Τ^ | | | |
| Trichloroethene | 0.14 U | ug/L | 1.0 | 0.14 | T^ | | | |
| 1,1,2-Trichloroethane | 0.27 U | ug/L | 1.0 | 0.27 | T^ | | | |
| Toluene | 0,33 U | ug/L. | 1.0 | 0.33 | T^ | | | |
| Tetrachloroethylene (PCE) | 0.42 U | ug/L | 1.0 | 0.42 | T^ | | | |
| Chlorobenzene | 0.36 U | ug/L | 1.0 | 0.36 | T^ | | | |
| Ethylbenzene | 0.31 U | ug/L | 1.0 | 0.31 | T^ | | | |
| Styrene | 0.25 ∪ | ug/L | 1.0 | 0.25 | T^ | | | |
| 1,4-Dichlorobenzene | 0.33 U | ug/L | 1.0 | 0.33 | T^ | | | |
| 1,2-Dichlorobenzene | 0.39 U | ug/L | 1.0 | 0.39 | Ţ^ | | | |
| 1,2,4-Trichlorobenzene | 0.44 U | ug/L | 1.0 | 0.44 | Ţ٨ | | | |
| Xylene (Total) | 0.44 U | ug/L | 3.0 | 0.44 | T^ | | | |

Surrogates

| Odifogates | | | | | | |
|---------------------------|-------|---------------|--------------|----------------|----------------|-----|
| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
| 1,2-Dichloroethane-d4 (S) | ug/L | 50 | 53 | 107 | 70 - 130 | Т |
| Bromofluorobenzene (S) | ug/L | 50 | 56 | 112 | 70 - 130 | Т |
| Toluene-d8 (S) | ug/L | 50 | 54 | 108 | 70 - 130 | T |



Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch: WCAf/4900

Preparation Method: SM 2540 C Associated Lab IDs: F2402348001 Analysis Method: SM 2540 C

Method Blank(5261134)

| Parameter | Results | Units | PQL | MDL | Lab |
|------------------------|---------|-------|-----|-----|-----|
| Total Dissolved Solids | 10 U | mg/L | 10 | 10 | F |





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch: WCAf/4905

Preparation Method: SM 2120 B

Associated Lab IDs: F2402348001

Analysis Method: SM 2120 B

Method Blank(5262183)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|---------|-------|-----|-----|-----|
| Color | 5.0 U | PCU | 5.0 | 5.0 | F^ |

POWERED BY HORIZON.





Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch:

WCAf/4920

EPA 300.0

Preparation Method: Associated Lab IDs:

F2402348001

Analysis Method: EPA 300.0

Method Blank(5264530)

| Parameter | Results | Units | PQL | MDL | Lab |
|----------------|---------|-------|------|-------|-----|
| Fluoride | 0.036 U | mg/L | 0.50 | 0.036 | F |
| Chloride | 0.12 U | mg/L | 5.0 | 0.12 | F |
| Nitrite (as N) | 0.018 U | mg/L | 0.50 | 0.018 | F |
| Nitrate (as N) | 0.023 U | mg/L | 0.50 | 0.023 | F |
| Sulfate | 0.076 U | mg/L | 5.0 | 0.076 | F |

Method Blank(5264535)

| Parameter | Results | Units | PQL | MDL | Lab |
|----------------|---------|-------|------|-------|-----|
| Fluoride | 0.036 U | mg/L | 0.50 | 0.036 | F |
| Chloride | 0.12 U | mg/L | 5.0 | 0.12 | F |
| Nitrite (as N) | 0.018 U | mg/L | 0.50 | 0.018 | F |
| Nitrate (as N) | 0.023 U | mg/L | 0.50 | 0.023 | F |
| Sulfate | 0.076 U | mg/L | 5.0 | 0.076 | F |





Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Results

QC Batch: WCAV29442

SM 4500-CN-E

Preparation Method: Associated Lab IDs: F2402348001 Analysis Method: SM 4500-CN-E

Method Blank(5275886)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|----------|-------|-------|--------|-----|
| Cyanide | 0.0040 U | mg/L | 0.010 | 0.0040 | Υ |

PC'VERED BY HORIZON'





Advanced Environmental Laboratories, Inc. 13100 Westlinks Terrace, Unit 10 Ft. Myers FL 33913
Payments: P.O. Box 551580 Jacksonville, FL 32255-1580
Phone: (239) 674-8130
Fax: (239) 674-8128

FINAL

Workorder: The Woodlands Plant 2 62-550 (F2402348)

QC Cross Reference

| Lab ID | Sample ID | Prep Batch | Prep Method |
|---------------------------|-----------|------------|-------------|
| CVAt/2211 - EPA 245.1 | | | |
| F2402348001 | POE | DGMt/7628 | EPA 245.1 |
| ICMJ/4235 - EPA 200.8 | | | t . |
| F2402348001 | POE | | |
| ICPt/4698 - EPA 200,7 | | | |
| F2402348001 | POE | | |
| MSVt/9071 - EPA 524.2 | | | |
| F2402348001 | POE | | |
| WCAf/4887 - SM 2150 B | | | |
| F2402348001 | POE | | |
| WCAf/4900 - SM 2540 C | | | |
| F2402348001 | POE | | |
| WCAf/4905 - SM 2120 B | | | |
| F2402348001 | POE | | |
| WCAf/4915 - SM 4500H+B | | | |
| F2402348001 | POE | | |
| WCAf/4920 - EPA 300.0 | | | |
| F2402348001 | POE | | |
| WCAg/15839 - SM 5540 C | | | |
| F2402348001 | POE | | |
| WCAt/29442 - SM 4500-CN-E | | | |
| F2402348001 | POE | | |





| System Name: Woodlands | mpleted by sampler - please type or print | PWS I.D. #; 628-0304 |
|--|--|--|
| System Type (check one): Community Address: 100 Shoreline Dr. | ☐Nontransient Noncommunity | ☐Transient Noncommunity |
| City: Lake Placid | ZIP Code: | 33852 |
| Phone # 727-848-8292 Fax #: 727-849-421 | 9E-Mail Address: | |
| SAMPLE INFORMATION (to be completed by sampler) Sample Number: <u>F24 04003001</u> Sa Sample Location (be specific): POE @WTP #1 | ample Date: 6 26 24 | Sample Time: |
| Disinfectant Residual (Required when reporting results for tr | | mg/L Fleld pH: |
| Sample Type (Check Only One) Distribution | | Sample (Check all that apply) |
| Entry Point (to Distribution) | Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| Plant Tap (not for compliance with 62-550) | Confirmation of MCL Exceedance | |
| Raw (at well or intake) | ☐Composite of Multiple Sites** ☐Other: | Clearance (permitting) |
| Max Residence Time | Sampling Procedure Used or Other C | Name and a |
| □Ave Residence Time | Sampling Procedure Osed or Other C | omments: |
| □Near First Customer | Socis | |
| | *See 62-550.500(6) for requirements and And 62-550.512(3) for nitrate or nitrite ex | restrictions. **See 62-550.30*(4) for requirements and ceedances, attach a rec agge for each site. |
| | SAMPLER CERTIFICAT | TON |
| , Vincent Cautero | Operator | , do HEREBY CERTIFY |
| (Print Name) | | Print Title) |
| that the above public water system and sample collection i | nformation is complete and correct. | |
| Signature: VX CT | | Date: 6/26/2024 |
| Certified Operator #: <u>C30027</u> Phone #: <u>239-460-</u> C | 0884 | Sampler's Fax #: |
| Sampler's E-mail: vcautero@usewatercorp.net | | |
| | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanced Env | ironmental Laboratories, Inc. | Florida DOH Certific | ation #:E84492 | Certification Expiration Da | ate:06/30/2025 |
|---|--|---------------------------|---|--|---|
| | | | ATTACH CURRENT | DOH ANALYTE SHEET* | |
| Address: 13100 Westlin | ks Terrace, Unit 10, Ft. Myers | , FL 33913 | Phone #: (239) 67 | 4-8130 | |
| Were any analyses subco | ntracted 🔽 Yes 🔲 No | If yes, please prov | ide DOH certification nui | mber(s): E82574 | |
| | | | ATTACH DOH ANAL | YTE SHEET FOR EACH SU | SCONTRACTED LAB |
| ANALYSIS INFORMATIO | N (to be completed by lab) D | ate Sample(s) Receive | d: 06/26/2024 | | |
| PWS ID: (From Page 1): | 6280304 S | ample Number (From Pa | ge 1): F2404003001 | Lab Assigned Report # Or | Job ID: <u>F2404003</u> |
| Group(s) Analyzed & Res | ults attached for compliance v | vith Chapter 62-550, F. | A.C. (Check all that apply): | | |
| Inorganics | Synthetic Organics | Volatile Organics | Disinfection Byproducts | <u>Radionuclides</u> | Secondaries |
| All except Asbestos | All 30 | All 21 | Trihalomethanes | Single Sample | All 14 |
| Partial | All Except Dioxin | Partial | Haloacetic Acids | Qtrly Composite* | Partial |
| Nitrate | Partial | | Chlorite | | |
| Nitrite | Dioxin Only | | Bromate | | • |
| Asbestos | | LAB CERTI | FICATION | | |
| l, | Jennifer Mazen | • | Project Mana | ager | , do HEREBY CERTIFY |
| | (Print Name | | (Print Title) | | • |
| | ata are correct and unless noted | meet all requirements of | the National Environmental | Laboratory Accreditation Con | ference (NELAC). |
| Signature: | trenfer 11 theoryers | | Date: | 08/19/2024 | |
| possible enforcement ag | and current Florida DOH lab cer ainst the public water system for cal sample dates & locations for e | failure to sample, and ma | irrent Analyte Sheet for the y result in notification of the | attached analysis results will DOH Bureau of Laboratory S | result in rejection of the repor Services. |
| | CONFIRMATION & NOTIFICATION | N IS REQUIRED WITHIN 24 | HRS FOR NITRATE OR NITR | RITE MCL EXCEEDANCES | |
| NON-DETECT | S ARE TO BE REPORTED AS THE | MDL WITH "U" QUALIFIER | R. (Non-detects reported as " | BDL" or with a "<" are not accept | able.) |
| COMPLIANCE DETERM | IINATION(to be completed by D | EP or DOH attach note | s as necessary) | | |
| Sample Collection & Ana | llysis Satisfactory: Yes | No | Replacement Sample | or Report Requested (circle of | or highlight group(s) above) |
| Person Notified: | | Date Notified: | DE | P/DOH Reviewing Official: | |
| Reporting Format 62-550.730 Effective January 1995, Revise | ed December 2012 | Pa | age: 16 of 32 | | |

*Results must be reported with appropriate qualifers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

SYNTHETIC ORGANICS

Report Number / Job ID: F2404003001

PWS ID (From Page 1):

6280304

62-550,310(4)(b)

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Extraction Date | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------------|------|-------|--------------------|------------|----------------------|------------|------|--------------------|------------------|------------------|----------------------------|
| 2005 | Endrin | 2 | ug/L | 0.0069 | U | EPA 508 | 0.0069 | 0.01 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2010 | Lindane | 0.2 | ug/L | 0.0071 | บ | EPA 508 | 0.0071 | 0.02 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2015 | Methoxychlor | 40 | ug/L | 0.0068 | U | EPA 508 | 0.0068 | 0.1 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2020 | Toxaphene | 3 | ug/L | 0.12 | U | EPA 508 | 0.12 | 1 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2031 | Dalapon | 200 | ug/L | 0.90 | U | EPA 515.3 | 0.90 | 1 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2032 | Diquat | 20 | ug/L | 0.37 | U | EPA 549.2 | 0.37 | 0.4 | 07/01/2024 | 07/02/2024 | 14:14 | E82574 |
| 2033 | Endothall | 100 | ug/L | 6.0 | UJ | EPA 548.1 | 6.0 | 9 | 06/27/2024 | 07/02/2024 | 13:58 | E82574 |
| 2034 | Glyphosate | 700 | ug/L | 5.9 | U | EPA 547 | 5.9 | 6 | | 07/02/2024 | 20:26 | E82574 |
| 2035 | Di(2-ethylhexyl)adipate | 400 | ug/L | 0.50 | U | EPA 525.2 | 0.50 | 0.6 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2036 | Oxamyl (Vydate) | 200 | ug/L | 1.8 | U | EPA 531.1 | 1.8 | 2 | | 07/04/2024 | 10:19 | E82574 |
| 2037 | Simazine | 4 | ug/L | 0.060 | U | EPA 525.2 | 0.060 | 0.07 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2039 | Di(2-ethylhexyl)phthalate | 6 | ug/L | 0.50 | U | EPA 525.2 | 0.50 | 0.6 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2040 | Picloram | 500 | ug/L | 0.090 | υ | EPA 515.3 | 0.090 | 0.1 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2041 | Dinoseb | 7 | ug/L | 0.18 | U | EPA 515.3 | 0.18 | 0.2 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2042 | Hexachlorocyclopentadinene | 50 | ug/L | 0.019 | U | EPA 508 | 0.019 | 0.1 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2046 | Carbofuran | 40 | ug/L | 0.67 | U | EPA 531.1 | 0.67 | 0.9 | | 07/04/2024 | 10:19 | E82574 |
| 2050 | Atrazine | 3 | ug/L | 0.090 | U | EPA 525.2 | 0.090 | 0.1 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2051 | Alachlor | 2 | ug/L | 0.15 | U | EPA 525.2 | 0.15 | 0.2 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2065 | Heptachlor | 0.4 | ug/L | 0.0060 | U | EPA 508 | 0.0060 | 0.04 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2067 | Heptachlor Epoxide | 0,2 | ug/L | 0.0052 | U | EPA 508 | 0.0052 | 0.02 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2105 | 2,4-D | 70 | ug/L | 0.095 | U | EPA 515.3 | 0.095 | 0.1 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2110 | 2,4,5-TP (Silvex) | 50 | ug/L | 0.090 | υ | EPA 515.3 | 0.090 | 0.2 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2274 | Hexachlorobenzene | 1 | ug/L | 0.0063 | U | EPA 508 | 0.0063 | 0.1 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2306 | Benzo(a)pyrene | 0.2 | ug/L | 0.015 | U | EPA 525.2 | 0.015 | 0.02 | 07/03/2024 | 07/10/2024 | 22:11 | E82574 |
| 2326 | Pentachlorophenol | 1 | ug/L | 0.038 | U | EPA 515.3 | 0.038 | 0.04 | 07/02/2024 | 07/04/2024 | 03:02 | E82574 |
| 2383 | Polychlorinated biphenyls (PCBs) | 0.5 | ug/L | 0.093 | U | EPA 508 | 0.093 | 0.1 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |
| 2931 | Dibromochloropropane | 0.2 | ug/L | 0.0061 | U | EPA 504.1 | 0.0061 | 0.02 | 07/02/2024 | 07/02/2024 | 23:17 | E82574 |
| 2946 | Ethylene Dibromide (EDB) | 0.02 | ug/L | 0.0090 | U | EPA 504.1 | 0.0090 | 0.01 | 07/02/2024 | 07/02/2024 | 23:17 | E82574 |
| 2959 | Chlordane | 2 | ug/L | 0.053 | U | EPA 508 | 0.053 | 0.2 | 07/01/2024 | 07/03/2024 | 20:50 | E82574 |

Note: Results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance.

Reporting Format 62-550.730 Effective January 1995, Revised December 2012 Page: 17 of 32

^{*}Results must be reported with appropraite qualifers in accordance with Florida Administration Code Rule 62-160, Table1. Results qualified with A, F, H, N, O, T, Z, ?. *, are unacceptable for comptiance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

| PUBLIC WATER SYSTEM INFORMATION (to be completed by System Name: Woodlands | eted by sampler - please type or print legi | ibly) PWS I.D. #: 628-0304 |
|---|--|--|
| System Type (check one): Community Address: 100 Shoreline Dr. | □Nontransient Noncommunity | ☐Transient Noncommunity |
| City: Lake Placid | ZIP Code: | 33852 |
| Phone # 727-848-8292 Fax #: 727-849-4219 | E-Mail Address: | |
| SAMPLE INFORMATION (to be completed by sempler) Sample Number: F24 04 00 3 00 2 Samp Sample Location (be specific): POE @WTP #2 | le Date: 6/26/24 | Sample Time: S io O AM PM (Circle OrLocation Code: |
| Disinfectant Residual (Required when reporting results for trihalo | methanes and haloacetic acids); mg | g/L Field pH: |
| Sample Type (Check Only One) | Reason(s) for Sar | mple (Check all that apply) |
| Distribution | ⊠Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| Entry Point (to Distribution) | Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) |
| ☐Plant Tap (not for compliance with 62-550) | ☐Composite of Multiple Sites** | □Clearance (permitting) |
| ☐Raw (at well or intake) | Other: | |
| Max Residence Time | Sampling Procedure Used or Other Con | nments: |
| ☐Ave Residence Time | | |
| ☐Near First Customer | Sõcs | |
| | *See 62-550.500(6) for requirements and res And 62-550.512(3) for nitrate or nitrite exceed | |
| | SAMPLER CERTIFICATION | ON |
| I, Vincent Cautero | Operator | , do HEREBY CERTIFY |
| (Print Name) | (Pri | nt Title) |
| that the above public water system and sample collection info | mation is complete and correct. | |
| Signature: | Dat | de: 6/26/2024 |
| Certified Operator #: C30027 Phone #: 239-460-088 | 4 Sar | mpler's Fax #: |
| Sampler's E-mail: vcautero@usewatercorp.net | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lob Namo: Advance | ed Environmental Laboratories, I | nc. Florida DOH Certifica | ation #: E84492 | Certification Expiration Da | ate: 06/30/2025 |
|--|---|--|---|--|---|
| Lab Name.Advance | ed Elivironimental Eaboratories, in | 1 (0)(100) (1) (1) | | DOH ANALYTE SHEET* | |
| Address: 13100 W | Vestlinks Terrace, Unit 10, Ft. My | /ers, FL 33913 | Phone #: (239) 6 | | |
| Were any analyses | subcontracted Yes | No If yes, please provide | de DOH certification nu | ımber(s): <u>E82574</u> | |
| | | | ATTACH DOH ANA | LYTE SHEET FOR EACH SUE | SCONTRACTED LAB |
| ANALYSIS INFOR | MATION (to be completed by lab) | Date Sample(s) Received | : 06/26/2024 | | |
| PWS ID: (From Pag | e 1): 6280304 | Sample Number (From Pag | e 1): F2404003002 | Lab Assigned Report # Or | Job ID: <u>F2404003</u> |
| Group(s) Analyzed | & Results attached for complian | ce with Chapter 62-550, F.A | A.C. (Check all that apply): | | |
| Inorganics All except Asbeste Partial Nitrate Nitrite Asbestos | Synthetic Organics os All 30 All Except Dioxin Partial Dioxin Only | Volatile Organics All 21 Partial LAB CERTIF | Disinfection Byproducts Trihalomethanes Haloacetic Acids Chlorite Bromate | Radionuclides Single Sample Otrly Composite* | Secondaries All 14 Partial |
| | | LAB CLITTI | | | 4. UEDEDV OEDTIDV |
| l, | Jennifer Mazen | · | Project Mar (Print Title | | , do HEREBY CERTIFY |
| that all attached anal | (Print Name lytical data are correct and unless no | oted meet all requirements of th | - | | iference (NELAC). |
| Signature: | Jeristu 11 mayor | | Date: _ | 08/19/2024 | , , |
| possible enforcer | e a valid and current Florida DOH lat ment against the public water systen adiological sample dates & locations | n for failure to sample, and may | rent Analyte Sheet for the result in notification of the | e attached analysis results will ne DOH Bureau of Laboratory \$ | result in rejection of the repor Services. |
| | CONFIRMATION & NOTIFICA | ATION IS REQUIRED WITHIN 24 I | HRS FOR NITRATE OR NIT | RITE MCL EXCEEDANCES | |
| NON- | DETECTS ARE TO BE REPORTED AS | THE MOL WITH "U" QUALIFIER | . (Non-detects reported as | s "BDL" or with a "<" are not accept | table.) |
| COMPLIANCE DE | ETERMINATION(to be completed | by DEP or DOH attach notes | as necessary) | | |
| Sample Collection | & Analysis Satisfactory: Yes | No | Replacement Sample | e or Report Requested (circle | or highlight group(s) above) |
| Person Notified: | | Date Notified: | Di | EP/DOH Reviewing Official: | |
| Reporting Format 62-5 | 550.730 5, Revised December 2012 | Pa | ge: 19 of 32 | | |

*Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

SYNTHETIC ORGANICS

Report Number / Job ID: F2404003002

PWS ID (From Page 1):

6280304

62-550.310(4)(b)

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Extraction Date | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|----------------------------------|------|-------|--------------------|------------|----------------------|------------|------|--------------------|-------------------------|------------------|----------------------------|
| 2005 | Endrin | 2 | ug/L | 0.0069 | U | EPA 508 | 0.0069 | 0.01 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2010 | Lindane | 0.2 | ug/L | 0.0071 | U | EPA 508 | 0.0071 | 0.02 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2015 | Methoxychlor | 40 | ug/L | 0.0068 | U | EPA 508 | 0.0068 | 0.1 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2020 | Toxaphene | 3 | ug/L | 0.12 | U | EPA 508 | 0.12 | 1 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2031 | Dalapon | 200 | ug/L | 0.90 | U | EPA 515.3 | 0.90 | 1 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2032 | Diquat | 20 | ug/L | 0.37 | U | EPA 549.2 | 0.37 | 0.4 | 07/01/2024 | 07/02/2024 | 14:23 | E82574 |
| 2033 | Endothall | 100 | ug/L | 6.0 | U3 | EPA 548.1 | 6.0 | 9 | 06/27/2024 | 07/02/2024 | 13:44 | E82574 |
| 2034 | Glyphosate | 700 | ug/L | 5.9 | U | EPA 547 | 5.9 | 6 | | 07/02/2024 | 20:41 | E82574 |
| 2035 | Di(2-ethylhexyl)adipate | 400 | ug/L | 0.50 | Ü | EPA 525.2 | 0.50 | 0.6 | 07/03/2024 | 07/10/2024 | 22:37 | E82574 |
| 2036 | Oxamyl (Vydate) | 200 | ug/L | 1.8 | Ü | EPA 531.1 | 1.8 | 2 | | 07/04/2024 | 10:56 | E82574 |
| 2037 | Simazine | 4 | ug/L | 0.060 | U | EPA 525.2 | 0.060 | 0.07 | 07/03/2024 | 07/10/2024 | 22;37 | E82574 |
| 2039 | Di(2-ethylhexyl)phthalate | 6 | ug/L | 0.50 | U | EPA 525.2 | 0.50 | 0.6 | 07/03/2024 | 07/10/2024 | 22:37 | E82574 |
| 2040 | Picloram | 500 | ug/L | 0.090 | U | EPA 515.3 | 0.090 | 0.1 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2041 | Dinoseb | 7 | ug/L | 0.18 | U | EPA 515.3 | 0.18 | 0.2 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2042 | Hexachlorocyclopentadinene | 50 | ug/L | 0.019 | U | EPA 508 | 0.019 | 0.1 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2046 | Carbofuran | 40 | ug/L | 0.67 | U | EPA 531.1 | 0.67 | 0.9 | | 07/04/2024 | 10:56 | E82574 |
| 2050 | Atrazine | 3 | ug/L | 0.090 | U | EPA 525.2 | 0.090 | 0.1 | 07/03/2024 | 07/10/2024 | 22:37 | E82574 |
| 2051 | Alachlor | 2 | ug/L | 0.15 | U | EPA 525.2 | 0.15 | 0.2 | 07/03/2024 | 07/10/2024 | 22:37 | E82574 |
| 2065 | Heptachlor | 0.4 | ug/L | 0.0060 | U | EPA 508 | 0.0060 | 0.04 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2067 | Heptachlor Epoxide | 0.2 | ug/L | 0.0052 | Ų | EPA 508 | 0.0052 | 0.02 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2105 | 2,4-D | 70 | ug/L | 0.095 | U | EPA 515.3 | 0.095 | 0.1 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2110 | 2,4,5-TP (Silvex) | 50 | ug/L | 0.090 | U | EPA 515.3 | 0.090 | 0.2 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2274 | Hexachlorobenzene | 1 | ug/L | 0.0063 | U | EPA 508 | 0.0063 | 0.1 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2306 | Benzo(a)pyrene | 0.2 | ug/L | 0.015 | U | EPA 525.2 | 0.015 | 0.02 | 07/03/2024 | 07/10/2024 | 22:37 | E82574 |
| 2326 | Pentachlorophenol | 1 | ug/L | 0.038 | U | EPA 515.3 | 0.038 | 0.04 | 07/02/2024 | 07/04/2024 | 03:34 | E82574 |
| 2383 | Polychlorinated biphenyls (PCBs) | 0.5 | ug/L | 0.093 | U | EPA 508 | 0.093 | 0.1 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |
| 2931 | Dibromochloropropane | 0.2 | ug/L | 0.0061 | U | EPA 504.1 | 0.0061 | 0.02 | 07/02/2024 | 07/03/2024 | 00:19 | E82574 |
| 2946 | Ethylene Dibromide (EDB) | 0.02 | ug/L | 0.0090 | U | EPA 504.1 | 0.0090 | 0.01 | 07/02/2024 | 07/03/2024 | 00:19 | E82574 |
| 2959 | Chlordane | 2 | ug/L | 0.053 | U | EPA 508 | 0.053 | 0.2 | 07/01/2024 | 07/03/2024 | 21:11 | E82574 |

Note: Results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance.

Reporting Format 62-550.730

Effective January 1995, Revised December 2012

Page: 20 of 32

^{*}Results must be reported with appropriate qualifers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring solution, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

| System Type (check one): | ☐Nontransient Noncommunity | PWS I.D. #: 628-0304 |
|---|--|--|
| Address: 100 Shoreline Dr. | | E name a recommunity |
| City: Lake Placid | ZIP Code: | 33852 |
| Phone # 727-848-8292 Fax#: 727-849-421 | | |
| SAMPLE INFORMATION (to be completed by sampler) Sample Number: F2H0H03003 Sa Sample Location (be specific): POE @WTP #1 Disinfectant Residual (Required when reporting results for tri Sample Type (Check Only One) Distribution Entry Point (to Distribution) Plant Tap (not for compliance with 62-550) Raw (at well or intake) Max Residence Time Ave Residence Time | halomethanes and haloacetic acids): m | ample (Check all that apply) ☐Replacement (of Invalidated Sample) ☐Special (not for compliance with 62-550) ☐Clearance (permitting) |
| □Near First Customer | Enclothall See 62-550,500(6) for requirements and res | strictions. "See 62-550.550(4) for requirements and |
| | And 62-550,512(3) for nitrate or nitrite excent | edances, attach a results page for each site, |
| \(\text{G====1} \text{O} \) | SAMPLER CERTIFICATION | ON |
| Vincent Cautero (Print Name) nat the above public water system and sample collection in ignature: | Operator (Printermation is complete and correct. | int Title), do HEREBY CERTIFY |
| ortified Oncome # C30027 - 320 460 or | Dat | te: 7/30/24 |
| ertified Operator #: C30027 Phone #: 239-460-0 | 584 Sar | npler's Fax #: |
| ampler's E-mail: vcautero@usewatercorp.net | | |

Reporting Format 62-550,730 Effective January 1995. Revised December 2012

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanced En | vironmental Laboratories, Inc | . Florida DOH Certifi | ication #:E84492 | _ Certification Expiration D | oate: 06/30/2025 |
|--|--|------------------------------|---|--|---|
| | | | ATTACH CURRENT | DOH ANALYTE SHEET* | |
| Address: 13100 Westlin | nks Terrace, Unit 10, Ft. Mye | rs, FL 33913 | Phone #: (239) 6 | 74-8130 | |
| Were any analyses subc | ontracted Ves N | o If yes, please prov | vide DOH certification nu | ımber(s): E82574 | |
| | | | ATTACH DOH ANAI | LYTE SHEET FOR EACH SU | BCONTRACTED LAB |
| ANALYSIS INFORMATI | ON (to be completed by lab) | Date Sample(s) Receive | ed: 07/30/2024 | | |
| PWS ID: (From Page 1): | 6280304 | Sample Number (From P | age 1): <u>F2404003003</u> | Lab Assigned Report # Or | Job ID: F2404003 |
| Group(s) Analyzed & Re | sults attached for compliance | with Chapter 62-550, F | .A.C. (Check all that apply): | | |
| Inorganics | Synthetic Organics | Volatile Organics | Disinfection Byproducts | Radionuclides | <u>Secondaries</u> |
| All except Asbestos | Ali 30 | All 21 | Trihalomethanes | Single Sample | All 14 |
| Partial | All Except Dioxin | Partial | Haloacetic Acids | Qtrly Composite* | Partial |
| Nitrate | ✓ Partial | | Chlorite | | |
| Nitrite | Dioxin Only | | Bromate | | |
| Asbestos | | LAB CERT | IFICATION | | |
| 1, | Jennifer Mazen | , | Project Man | ager | , do HEREBY CERTIFY |
| | (Print Name | | (Print Title) | | - |
| | data are correct and unless note | d meet all requirements of | the National Environmental | Laboratory Accreditation Cor | nference (NELAC). |
| Signature: | Terrofic 11 mayors | | Date: | 08/19/2024 | |
| possible enforcement a | d and current Florida DOH lab co gainst the public water system fo ical sample dates & locations for | or failure to sample, and ma | urrent Analyte Sheet for the ay result in notification of th | e attached analysis results will e DOH Bureau of Laboratory | result in rejection of the repor Services. |
| | CONFIRMATION & NOTIFICATION | ON IS REQUIRED WITHIN 24 | HRS FOR NITRATE OR NIT | RITE MCL EXCEEDANCES | |
| NON-DETEC | TS ARE TO BE REPORTED AS TH | IE MDL WITH "U" QUALIFIE | R. (Non-detects reported as | "BDL" or with a "<" are not accep | table.) |
| COMPLIANCE DETERI | MINATION(to be completed by | DEP or DOH attach note | es as necessary) | | |
| Sample Collection & Ana | alysis Satisfactory: Yes | No | Replacement Sample | or Report Requested (circle | or highlight group(s) above) |
| Person Notified: | | Date Notified: | DE | P/DOH Reviewing Official: | |
| Reporting Format 62-550.730 Effective January 1995, Revis | | P | age: 22 of 32 | | |

*Results must be reported with appropraite qualifers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

SYNTHETIC ORGANICS

Report Number / Job ID: F2404003003

PWS ID (From Page 1):

6280304

62-550.310(4)(b)

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Extraction Date | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|-------------|-----|-------|--------------------|------------|----------------------|------------|-----|--------------------|------------------|------------------|----------------------------|
| 2033 | Endothall | 100 | ug/L | 6.0 | U | EPA 548.1 | 6.0 | 9 | 07/31/2024 | 08/07/2024 | 17:07 | E82574 |

Note: Results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance.

| System Name: Woodlands | | PWS I.D. #: 628-0304 |
|---|---|--|
| System Type (check one): Community Address: 100 Shoreline Dr. | Nontransient Noncommunity | Transient Noncommunity |
| City: Lake Placid | ZIP Code: | 33852 |
| Phone # 727-848-8292 Fax #: 727-849-4219 | E-Mail Address: | |
| SAMPLE INFORMATION (to be completed by sampler) Sample Number: F1404 603 004 Sample Sample Location (be specific): POE @WTP # 2 | pple Date: 7 38 24 | Sample Time: 1:40 PM (Circle Or |
| Disinfectant Residual (Required when reporting results for triba | alomethanes and haloacetic acids): | |
| Sample Type (Check Only One) | | mple (Check all that apply) |
| Distribution | ☐Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| Entry Point (to Distribution) | Confirmation of MCL Exceedance* | Special (not for compliance with 62-550) |
| Plant Tap (not for compliance with 62-550) | Composite of Multiple Sites** | ☐Clearance (permitting) |
| Raw (at well or intake) | ⊘Other: | Holearance (beaninging) |
| ☐Max Residence Time | Sampling Procedure Used or Other Com | imenis: |
| ☐Ave Residence Time | | |
| □ Near First Customer | Enduthall | |
| | *See 62-550.500(6) for requirements and rest And 62-550.512(3) for nitrate or nitrite exceed | trictions. **See 62-550.550(4) for requirements and dances. attach a results page for each site. |
| | SAMPLER CERTIFICATIO | N |
| I, Vincent Cautero | Operator | |
| (Print Name) | (Prir | nt Title) , do HEREBY CERTIFY |
| that the above public water system and sample collection inf | ormation is complete and correct. | • |
| Signature: UX CX | Date | = 7/30/24 |
| Certified Operator #: C30027 Phone #: 239-460-08 | 84Sam | npler's Fax#: |
| Sampler's E-mail: vcautero@usewatercorp.net | | |

Reporting Formai 62-550.730 Effective January 1995, Revised December 2012

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanced En | vironmental Laboratories, Inc. | Florida DOH Certifi | cation #:E84492 | Certification Expiration Da | ate: 06/30/2025 |
|--|--|-----------------------------|---|------------------------------------|-----------------------------|
| | | | ATTACH CURRENT | DOH ANALYTE SHEET* | |
| Address: 13100 Westlin | nks Terrace, Unit 10, Ft. Myers | s, FL 33913 | Phone #: (239) 67 | 4-8130 | |
| Were any analyses subc | ontracted Ves No | If yes, please prov | vide DOH certification nu | mber(s):_E82574 | |
| | | | ATTACH DOH ANAL | YTE SHEET FOR EACH SUB | CONTRACTED LAB |
| ANALYSIS INFORMATI | ON (to be completed by lab) | Date Sample(s) Receive | ed: <u>07/30/2024</u> | | |
| PWS ID: (From Page 1): | 6280304 | Sample Number (From Pa | age 1): F2404003004 | Lab Assigned Report # Or | Job ID: <u>F2404003</u> |
| Group(s) Analyzed & Re | sults attached for compliance | with Chapter 62-550, F | .A.C. (Check all that apply): | | |
| Inorganics All except Asbestos | Synthetic Organics All 30 | Volatile Organics All 21 | Disinfection Byproducts Trihalomethanes | Radionuclides Single Sample | Secondaries All 14 |
| Partial | All Except Dioxin | Partial | Haloacetic Acids | Qtrly Composite* | Partial |
| Nitrate | Partial | | Chlorite | | |
| Nitrite | Dioxin Only | | Bromate | | |
| Asbestos | | LAB CERT | IFICATION | | |
| Ι, | Jennifer Mazen | • | Project Mana | ager | , do HEREBY CERTIFY |
| | (Print Name | | (Print Title) | | |
| | data are correct and unless noted | meet all requirements of | the National Environmental | Laboratory Accreditation Conf | erence (NELAC). |
| Signature: | Terenter of successions. | | Date: | 08/19/2024 | |
| possible enforcement a | d and current Florida DOH lab ce gainst the public water system for jical sample dates & locations for | r failure to sample, and ma | | | |
| | CONFIRMATION & NOTIFICATION | ON IS REQUIRED WITHIN 24 | HRS FOR NITRATE OR NITE | RITE MCL EXCEEDANCES | |
| NON-DETEC | TS ARE TO BE REPORTED AS TH | E MDL WITH "U" QUALIFÆ | R. (Non-detects reported as ' | BDL" or with a "<" are not accepta | able.) |
| COMPLIANCE DETER | MINATION(to be completed by [| DEP or DOH attach note | es as necessary) | | |
| Sample Collection & An | alysis Satisfactory: Yes | No | Replacement Sample | or Report Requested (circle o | r highlight group(s) above) |
| Person Notified: | | Date Notified: | DE | P/DOH Reviewing Official: | |
| Reporting Format 62-550.730 Effective January 1995, Revis | | P | age: 25 of 32 | | |

^{*}Results must be reported with appropriate qualifers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

SYNTHETIC ORGANICS 62-550.310(4)(b)

Report Number / Job ID: <u>F2404003004</u> PWS ID (From Page 1): <u>6280304</u>

| Contam | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | RDL | Extraction Date | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------|-------------|-----|-------|--------------------|------------|----------------------|------------|-----|--------------------|------------------|------------------|----------------------------|
| 2033 | Endothall | 100 | ug/L | 6.0 | U | EPA 548.1 | 6.0 | 9 | 07/31/2024 | 08/07/2024 | 17:22 | E82574 |

Note: Results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance.

| GI | Advanced Environmental | . 1048, FL 37701 • 407.937.1594 • Lab ID: E53076 L 33913 • 239.674.8130 • Lab ID: E84492 i • 904.363.9350 • Lab ID: E82574 L 32303 • 850.219.6274 • Lab ID: E811095 iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii | | | | | Miramar: 1021 | * F 2 4 0 4 0 0 3 * | | | | | | | | | | |
|-------------------|--|---|---------------|---------------------|----------------|------------------|---------------|---------------------|-------------------------------|--|------------------------|------------------------------------|-------------------|-----------|-----------|----------|-------------|-----------------|
| Client Name: US V | Water | | Project Name | 3 ; | LP Wate | erworks-T | he Wood | dlands | BOTTLE SIZE & TYPE | 5x32oz4G fot2048007 1x LAP 6171006 |).GV 0002 | DOZ AGV DOS | | 1 | 1 1 | 1 | 1 | 1 |
| Address: 4939 | Cross Bayou | | Project Numb | ber; | | | | | T & | 5x32oz ot2048 LAP 61 | 40ml CGV lot2230002 | 3x40mlAGV 5x40mlAGV 5x102003 | | | | | | |
| New | Port Richey,FL | | PO Number: | | | | | | | | | 2 17 3 | | | | | | ٣ ح |
| Phone: | 727-848-8292 | | FDEP Facility | y No: | 6280304 | ŧ . | | | REC | SOC508/525.2/548.1/ 549.2 | | | | | | NUMBER | | |
| FAX: | 727-849-4219 | | FDEP Facili | ity Addr: | | | | | Ö | | | 6.3 | | | | | | 15 |
| Contact. | Melisa Rotteveel | | | | | | | | SRE | | | 515.3 | | | | | | |
| Sampled By: | Cj Berish V | Cautor | Special instr | ructions: | | | | | ANALYSIS REQUIRED | 8/52 | | 1 5471 | | | 1 1 | | | \ \ |
| Turn Around Time: | Standard x | Rush | | 10410 ;MC | AA KILR1-1L1 e | 2x0824; NaThio 1 | | 26/24 | ANA |)C50 | 531.1 | 504.17 | | | | | | LABORATORY I.D. |
| AEL Profile #: | | | ADaPT | - | EQuIS | PLING | Other | | | - | | | | | | | | - S |
| SAMPLE ID | SAMPLE | DESCRIPTION | | Grab Comp | DATE | TIME | MATRIX | NO. COUNT | Preservation Plaid- Fillered? | T | TANCAA | Т | | + | | | | AB A |
| | Plant | #1 @ POE | | G | 6/26/2 | 11:20 | DW | 14 | | Х | Х | Х | | | | | | - |
| | Plant | #2 @ POE | (| G | 7 | 8:00 | DW | 14 | | X | Х | Х | | | | | | 001 |
| | | | | | | | | | | | | | | | | | | 002 |
| | | | - | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | - | | | | |
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| | | | | | | | | | | | | | | | | | | - |
| | W=wastewater SW=sur Yes No No Form last revised 07/2 | and the same | water DW=r | drinking emp fro | in piank L | AAuere | required, p | H checke | d | Temp, wh | en receiv | ed (obser | ved) 9.0 | °C T | emp, when | received | (corrected) | 40. |
| | inquished by: | Date Time | | Red | ceived by: | ~ doen tot t | Date | emp by u | ident | mer (circle | IK temp g | un used) NKINC | J: 9A G: | LT-1 LT-2 | T: 10A | A: 3A M | A: 3A S: 1 | IX F: 1A |
| 1 Christoff | a sury | etzete 912 dzidzy 1441 | 6 | T | | 0 | 6/20/2 | y 7/ | 2 | (When i | | nation not o | Otherwise supplie | | 5364150 | | | |
| 4 | | | | | | | | | | 11 | of Water: -Address: | | | | | | | |

| G | Advanced Environmental Laboratories, Inc. | Attamonte Springs; 360 Northhake Blvd., Ste. 1048, Ft. 32701 • 407.937.1594 • Lab ID. Fort Mivers: 13100 Westinks Terrace, Ste. 10, Ft. 33913 • 239.674.8130 • Lab ID: E84492 Jacksonville: 6681 Southpoint Pkery., Ft. 32216 • 904.383.9356 • Lab ID: E82574 Tallahassee: 2639 North Monroe St., Suite D, Ft. 32303 • 850.219.6274 • Lab ID: E81109 | | | | | | D: E84492 174 | 076 | F 2404003 Page 1 of 1 Gainesville: 4965 SW 41st Blvd, FL 32606 • 352.377.2349 • Lab IO: E82001 Miramar: 10200 USA Today Way, FL 33025 • 954.889.2288 • Lab IO: E82535 Tampa: 9610 Princess Pakin Ave., FL 33618 • 813.630.9615 • Lab IO: E84589 | | | | | | | | |
|-----------------|---|---|------------------------|------------|-------------|---------------------|-----------|-----------------------|----------------------|---|---------|-----|-------|----------|----------|------------|---------------|---------------|
| Client Name: US | Water | Project Nan | ne: | LP Wate | erworks-T | he Wood | ilands | BOTTLE SIZE & TYPE | 200 | | | | | | | | | |
| Address: 4939 | 9 Cross Bayou | Project Nur | mber; | | | | | BOTT 8.1 | 3202AG kc/2048037 | | | | | | | | | |
| New | Port Richey,FL | PO Numbe | ıc | | | | | | | | | | | | | | | œ, |
| Phone: | 727-848-8292 | FDEP Facility No: 6280304 | | | | | | RED | | | | | | | | | | NUMBER |
| FAX: | 727-849-4219 | FOEP Fac | cility Addr. | | | | | DO: | | | | | | | | | | Ę |
| Conlact: | Melisa Rotteveel | 1 | | | | | | SRE | | | | | | | | | | 1.D. I |
| Sampled By: \C | Standard x Rush | - | | No Charge- | Reanalysis | 1F2403-03 ex % | 25/24 | ANALYSIS REQUIRED | 548.1 | | | | | | | | | LABORATORY I. |
| AEL Profile #: | | ADaPT | | EQuIS | | Other | | < | soc | | | | | | | | | ₹ |
| SAMPLE ID | SAMPLE DESCRIPTION | | Grab | SAM | PUNG | WATRIX | NO. | Preservation | T | | | | | | | | $\overline{}$ | 80 |
| 07 dtil 22 12 | CA WAY EL DEGOTAL FIOR | | Comp | DATE | TIME | MALINA | COUNT | Field- Filtered? | | | | | | | | | | 5 |
| | Plant #1 @ POE | | Grab | 7/30/2 | 17:20 | DW | 1 | | Х | | | | | | | | | 003 |
| | Plant #2 @ POE | | Grab | h | 7:40 | DW | 1 | | х | | | | | | | | | æ4 |
| | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| Received on Ice | W=wastewater SW=strface water GW=ground Yes No Temp taken from samp | d water DW ble | /≖drinking Temp fro | m blank | When | e required, p | pH checke | d | Temp. where | n received (ob | served) | 0.0 | *C Te | mp. wher | received | (corrected | 0 0 | O.C |
| | Form last revised 07/26/2022 Inquished by: Date Time | | Per | Devi | ce used for | measuring 7 Date | Tim | | | temp gun use | | | | T: 10A | A: 3A | M: 3A S | k tV | (14) |
| 1 2 | 1/20/20 /420 | 7/ | | My . | 7 | 7/30/20 | 124 8 | 23 | II . | _ | | | | 5364150 | | | | |

Site-Address:



Phone: (239) 674-8130 Fax: (239) 674-8128

FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

August 19, 2024

Melisa Rotteveel **US Water Services** 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: F2404003 LP Waterworks Woodlands SOC

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory between Wednesday June 26, 2024 and Tuesday July 30, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as cutlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely.

Jennifer Mazen, Project Manager JMazen@aellab.com

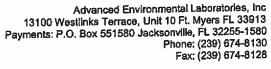
Service noneyon

Monday, August 19, 2024 1:44:15 PM Dates and times are displayed using (-04:00) Page 1 of 32

Certificate of Analysis

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

Sample Summary

| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Analytes Reported | Basis |
|----------------------------|----------------|--------|-----------|------------------|------------------|----------------------|-------|
| F2404003001 | Plant 1 at POE | DW | EPA 504.1 | 06/26/2024 07:20 | 06/26/2024 09:12 | 2 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 508 | 06/26/2024 07:20 | 06/26/2024 09:12 | 10 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 515.3 | 06/26/2024 07:20 | 06/26/2024 09:12 | 6 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 525.2 | 06/26/2024 07:20 | 06/26/2024 09:12 | 6 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 531.1 | 06/26/2024 07:20 | 06/26/2024 09:12 | 2 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 547 | 06/26/2024 07:20 | 06/26/2024 09:12 | 1 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 548.1 | 06/26/2024 07:20 | 06/26/2024 09:12 | 1 | NA |
| F2404003001 | Plant 1 at POE | DW | EPA 549.2 | 06/26/2024 07:20 | 06/26/2024 09:12 | 1 | NA |
| F2404003001 | Plant 2 at POE | DW | EPA 504.1 | 06/26/2024 08:00 | 06/26/2024 09:12 | 2 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 508 | 06/26/2024 08:00 | 06/26/2024 09:12 | 10 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 515.3 | 06/26/2024 08:00 | 06/26/2024 09:12 | 6 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 525.2 | 06/26/2024 08:00 | 06/26/2024 09:12 | 6 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 531.1 | 06/26/2024 08:00 | 06/26/2024 09:12 | 2 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 547 | 06/26/2024 08:00 | 06/26/2024 09:12 | 1 | NA |
| | Plant 2 at POE | DW | EPA 548.1 | 06/26/2024 08:00 | 06/26/2024 09:12 | 1 | NA |
| F2404003002 | Plant 2 at POE | DW | EPA 549.2 | 06/26/2024 08:00 | 06/26/2024 09:12 | 1 | NA |
| F2404003002 F2404003003 | Plant #1 POE | DW | EPA 548.1 | 07/30/2024 07:20 | 07/30/2024 08:23 | 1 | NA |
| F2404003003 | Plant #2 POE | DW | EPA 548.1 | 07/30/2024 07:40 | 07/30/2024 08:23 | 1 | NA |



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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

Workorder Summary

Batch Comments

GCSI/6603 - E508 Analysis, Water

The samples associated with this analysis batch GCSj:6603 were extracted on 07/01/2024 09:00.

HPLJ/2759 - E547 Analysis, Water

The spike recoveries of Diquat (at 158% and 143%, respectively) for the Laboratory Control Sample (LCS) and LCS Duplicate were outside the upper control criterion (Limits 70-130%). The analyte in question was not detected in the associated client samples. The error associated with elevated recovery equates to a high bias. The sample data is not significantly affected. No further corrective action was required.

HPLI/2763 - E549,2 Analysis, Water

The spike recovery of Diquat (at 152%) for the Laboratory Control Sample (LCS) Duplicate was outside the upper control criterion (Limits 70-130%). The analyte in question was not detected in the associated client samples. The error associated with elevated recovery equates to a high blas. The sample data is not significantly affected. No further corrective action was required.

The relative percent difference (RPD) for Diquat between the Laboratory Control Sample (LCS) and the Laboratory Control Sample Duplicate (LCSD) was outside control criteria due to relatively higher spike recovery in 5370733LCSD in comparison with 5370732LCS. Spike recoveries in the LCS were within acceptable limits, indicating the analytical batch was in control. No further corrective action was required.

MSSI/4087 - E548.1 Analysis, Water

The samples associated with this analysis batch were extracted on 06/27/2024 09:03.

The spike recovery of Endothall for the Laboratory Control Sample (LCS) (18%) and the Laboratory Control Sample Duplicate (LCSD) (35%) was outside the lower control criterion (63-131%). The error associated with the recovery equates to a low blas. Client sample were past the recommended holding time. All batch samples were qualified accordingly.

MSSj/4100 - E525.2 Analysis, Water

The samples associated with this analysis batch were extracted on 07/03/2024 09:20.

MSSJ/4175 - E548.1 Analysis, Water

All samples associated with this analysis batch were extracted on 07/31/2024 at 16:05.

The upper control criterion was exceeded for Endothall in Initial Calibration Verification (ICV) standards for analytical batch 4175, indicating increased sensitivity. The client samples reported in this batch did not contain the analyte in question. Since the apparent problem equates to a potential high bias, the data quality is not affected. No further corrective action was required.

The upper control criterion was exceeded for Endothall In Continuing Calibration Verification (CCV) standards for sequence 240809T, indicating increased sensitivity. The client samples reported in this batch did not contain the analytes in question. Since the apparent problem equates to a potential high bias, the data quality is not affected. No further corrective action was required.





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FINAL

Workorder: L.P Waterworks Woodlands SOC (F2404003)

QC Results Qualifiers

Parameter Qualiflers

The compound was analyzed for but not detected.

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

Lab QC Failure J3

Lab Qualifiers

DOH Certification #E82574 (FL NELAC) AEL-Jacksonville DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville

Certificate of Analysis



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FINAL

Analysis Method: EPA 504.1

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

GCSj/6596

EPA 504.1

Associated Lab IDs:

F2404003001, F2404003002

Method Blank(5373049)

Preparation Method:

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------------------------|----------|-------|-------|--------|-----|
| Ethylene Dibromide (EDB) | 0.0092 U | ug/L | 0.020 | 0.0092 | J۸ |
| 1 2-Dibromo-3-Chioropropane | 0.0062 U | ug/L | 0.020 | 0.0062 | J۸ |

Surrogates

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|--------------------------|-------|---------------|--------------|----------------|----------------|-----|
| Tetrachloro-m-xvlene (S) | ug/L | 1 | 0.96 | 96 | 64 - 150 | J |





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FINAL

Analysis Method: EPA 515.3

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

GCS/6599

EPA 515.3

F2404003001, F2404003002

Associated Lab IDs: Method Blank(5373489)

Preparation Method:

| *************************************** | | | | | |
|---|---------|--------------|------|-------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| Dalapon | 0.90 U | ug/L | 5.0 | 0.90 | J |
| 2.4-D | 0.095 ປ | ug/L | 5.0 | 0.095 | J |
| Pentachlorophenol | 0.038 ປ | ug/L | 0.50 | 0.038 | J |
| Silvex (2,4,5-TP) | 0.090 U | ug/L | 1.0 | 0.090 | J |
| Picloram | 0.090 U | ug/L | 0.50 | 0.090 | J |
| Dinoseb | 0.18 U | ug/L | 2.5 | 0.18 | J |
| Dillogen | | - | | | |

Surronatas

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|-----------------------------------|-------|---------------|--------------|----------------|----------------|-----|
| 2.4-Dichlorophenylacetic scid (S) | ua/L | 25 | 22 | 88 | 70 - 130 | J |



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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

GCSI/6603

Preparation Method: Associated Lab IDs: **EPA 508**

F2404003001, F2404003002

Analysis Method: EPA 508

Method Blank(5370680)

| Desembles | Results | Units | PQL | MDL | Lab |
|-------------------------------------|----------|-------|-------|--------|-----|
| Parameter Hexachlorocyclopentadiene | 0.019 U | ug/L | 0.020 | 0.019 | J |
| * | 0.0063 U | ug/L | 0.020 | 0.0063 | J |
| Hexachlorobenzene | 0,0071 U | ug/L | 0.020 | 0.0071 | J |
| gamma-BHC (Lindane) | 0.0060 U | ug/L | 0.020 | 0.0060 | J |
| Heptachlor | 0,0052 U | ug/L | 0.020 | 0.0052 | J |
| Heptachlor Epoxide | 0.0069 U | ug/L | 0.020 | 0.0069 | J |
| Endrin | | ug/L | 0.020 | 0.0068 | j |
| Methoxychlor | 0,0068 U | - | 0.20 | 0.093 | J |
| PCBs | 0.093 U | ug/L | 0.20 | 0.053 | J |
| Chlordane (technical) | 0.053 U | ug/L | 0.20 | 0.12 | J |
| Toxaphene | 0.12 U | ug/L | 0.20 | V. 12 | • |

| Surrogates | | | | | | |
|------------------------|-------|---------------|--------------|----------------|----------------|-----|
| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
| Decachlorobiphenyi (S) | mg/L | 0,0005 | 0.000510 | 102 | 70 - 130 | J |

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

HPLJ/2759

Analysis Method: EPA 547

Preparation Method: Associated Lab IDs:

EPA 547

F2404003001, F2404003002

Method Blank(5373591)

| Parameter | Results | Units | PQL | MDL | Lab |
|------------|---------|-------|-----|-----|-----|
| Givphosate | 5,9 U | ug/L | 50 | 5.9 | J |





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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch: HPLJ/2763

Analysis Method: EPA 549.2

Preparation Method: EPA 549.2

Associated Lab IDs: F2404003001, F2404003002

Method Blank(5370731)

| | | | | 44704 | Lob |
|-------------|---------|-------|-----|-------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| 1 diditotoi | 0.0711 | ug/L | 5.0 | 0.37 | J |
| Diguat | 0.37 U | uğır | 0.0 | 2.2. | |

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch: HPLj/2765

Analysis Method: EPA 531.1

Preparation Method: EPA 531.1

Associated Lab iDs: F2404003001, F2404003002

Method Blank(5377118)

| *************************************** | | 14 .11. | DOI. | MDL | Lab |
|---|----------------|---------|------|------|-----|
| Parameter | Results | Units | PQL | MDL | 600 |
| Oxamyl | 1.8 U | ug/L | 2.5 | 1.8 | J |
| Carbofuran | 0.6 7 U | ug/L | 2.5 | 0.67 | J |

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

MSSJ/4087

Analysis Method: EPA 548.1

Preparation Method:

EPA 548.1

Associated Lab IDs: F2404003001, F2404003002

Method Blank(5367579)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------|---------|-------|-----|-----|-----|
| Endothall | 6.0 U | ug/L | 8.0 | 6.0 | J |

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

MSSj/4100

Analysis Method: EPA 525.2

Preparation Method:

EPA 525.2

Associated Lab IDs: F2404003001, F2404003002

Method Blank(5376136)

| Parameter | Results | Units | PQL | MDL | Lab |
|---|----------------------|-------|------|-------|-----|
| Simazine | 0.060 ป | ug/L | 0.50 | 0.060 | J |
| Atrazine | 0.0 9 0 U | ug/L | 0.50 | 0.090 | J |
| Alachlor | 0.15 U | ug/L | 0.50 | 0.15 | J |
| DI(2-ethylhexyl) adipate | 0.50 U | ug/L | 1.0 | 0.50 | J |
| * | 0.50 U | ug/L | 2.0 | 0.50 | J |
| bis(2-Ethylhexyl) phthalate | 0.015 U | ug/L | 0.50 | 0.015 | J |
| Benzo[a]pyrene | 0.010.0 | 43,4 | | | |

Surrogates

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|---------------------|-------|---------------|--------------|----------------|----------------|-----|
| p-Terphenyl-d14 (S) | mg/L | 0.0050 | 0.0050 | 100 | 70 - 130 | J |



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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Results

QC Batch:

MSSj/4175

EPA 548.1

Preparation Method:

Associated Lab IDs: F2404003003, F2404003004

Analysis Method: EPA 548.1

Method Blank(5417794)

| | | Links | POL | MDL | Lab |
|-----------|---------|-------|-----|-----|-----|
| Parameter | Results | Units | FUL | | |
| Endothall | 6.0 U | ug/L | 8.0 | 6.0 | J |

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FINAL

Workorder: LP Waterworks Woodlands SOC (F2404003)

QC Cross Reference

| Lab (D | Sample ID | Prep Batch | Prep Method |
|-----------------------|----------------|-------------------|-------------|
| GCSI/6596 - EPA 504.1 | | | |
| F2404003001 | Plant 1 at POE | EXTJ/9409 | EPA 504.1 |
| F2404003002 | Plant 2 at POE | EXTJ/9409 | EPA 504.1 |
| GCSJ/6599 - EPA 515.3 | | | |
| F2404003001 | Plant 1 at POE | GCSJ/6598 | EPA 515.3 |
| F2404003002 | Plant 2 at POE | GCSj/6598 | EPA 515.3 |
| GCSj/6603 - EPA 508 | | | |
| F2404003001 | Plant 1 at POE | EXTJ/9385 | EPA 508 |
| F2404003002 | Plant 2 at POE | EXTJ/9385 | EPA 508 |
| HPL//2759 - EPA 547 | | | |
| F2404003001 | Plant 1 at POE | | |
| F2404003002 | Plant 2 at POE | | |
| HPLj/2763 - EPA 549.2 | | | |
| F2404003001 | Plant 1 at POE | EXTJ/9386 | EPA 549.2 |
| F2404003002 | Plant 2 at POE | EXTJ/9386 | EPA 549.2 |
| HPLJ/2765 - EPA 531.1 | | | |
| F2404003001 | Plant 1 at POE | | |
| F2404003002 | Plant 2 at POE | | |
| MSSj/4087 - EPA 548.1 | | | |
| F2404003001 | Plant 1 at POE | EXTJ/9377 | EPA 548.1 |
| F2404003002 | Plant 2 at POE | EXT y 9377 | EPA 548.1 |
| MSSJ/4100 - EPA 525.2 | | | |
| F2404003001 | Plant 1 at POE | EXTJ/9419 | EPA 525.2 |
| F2404003002 | Plant 2 at POE | EXTJ/9419 | EPA 525.2 |
| MSSJ/4175 - EPA 548.1 | | | |
| F2404003003 | Plant #1 POE | EXT]/9656 | EPA 548.1 |
| F2404003004 | Plant #2 POE | EXT)/9656 | EPA 548.1 |

| | System Name: The Woodlands o | | • | | PWS I.D. #: 628-0304 | - |
|-----|---|------------------------------------|--|-------------------------|---|------------------|
| | System Type (check one): Command Address: 100 Shoreline Dr. | munity | Nontransient Noncommunity | ☐Transient Nonc | community | |
| | City: Lake Placid | | ZIP Code: _ | 33852 | | |
| | Phone # 727-848-8292 Fax | #: 727-849-4219 | E-Mail Address: | | | |
| | SAMPLE INFORMATION (to be com | pleted by sampler) | | | | |
| | Sample Number: UZ40025 | | te:8-19-24 | Sample Time:_ | 9:00 | AM PM (Circle On |
| | Sample Location (be specific) : Men's | restroom @ Pool | | Loc | cation Code: | |
| | Disinfectant Residual (Required when I | reporting results for trihalometha | nes and haloacetic acids): 1-16 m | g/L Field pH: | 7.4 | |
| | Sample Type (Check Only One) | | Reason(s) for Sa | mple (Check all that ap | ply) | |
| gf | Distribution | ⊠Re | outine Compliance with 62-550 | ☐Replacement (| of Invalidated Sample) | |
| ala | ☐Entry Point (to Distribution) | □c | onfirmation of MCL Exceedance | ☐Special (not for | r compliance with 62-550) | |
| | ☐Plant Tap (not for compliance with 62 | 2-550) | omposite of Multiple Sites** | Clearance (per | • | |
| | Raw (at well or intake) | | ther: | | | |
| | Max Residence Time | Sam | pling Procedure Used or Other Cor | nments: | | |
| | ☐Ave Residence Time | | | | | |
| | ☐Near First Customer | | OBP5 | | | |
| | | | 62-550,500(6) for requirements and res 62-550,512(3) for nitrate or nitrite expe- | | -550.550(4) for requirements a results page for each site, | and |
| | | 8 | SAMPLER CERTIFICATION | ON | | |
| | I, Christopher Berish | | Lead Operator | | , do HEREBY C | יבטדופי |
| | (Print Na | me) | (Pr | int Title) | , do nance) o | EXTIC |
| | that the above public water system and | sample collection informatio | n is complete and correct. | | | |
| | Signature: Chrickopun Review / | u.s. water | Da | te: 8-19-24 | | |
| | Certified Operator # B28149 Pho | one #: 863-991-1828 | Sa | mpler's Fax #: | | |
| | Sampler's E-mail: Cjberish@uswate | rcorp.net | | | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanced Environ | mental Laboratories, Inc. | Florida DOH Certifica | ation #:E851195 | Certification Expiration Da | ate:06/30/2025 |
|--|--|---|--|--|---|
| | | | ATTACH CURRENT D | OOH ANALYTE SHEET* | |
| Address: 125 Tower St., Lak | ke Placid, FL 33852 | | Phone #: _(863) 655 | 5-4022 | |
| Were any analyses subcontra | cted 🗹 Yes 🗌 No | If yes, please provid | de DOH certification num | nber(s): E84589,E82574 | |
| | | | ATTACH DOH ANALY | TE SHEET FOR EACH SUE | SCONTRACTED LAB |
| ANALYSIS INFORMATION (| (to be completed by lab) Date | e Sample(s) Received | : 08/19/2024 | | |
| PWS ID: (From Page 1): | 628-0304 Sam | ple Number (From Page | e 1): <u>L2400257001</u> L | ab Assigned Report # Or | Job ID:L2400257 |
| Group(s) Analyzed & Results | attached for compliance with | Chapter 62-550, F.A | .C. (Check all that apply): | | |
| Inorganics All except Asbestos Partial Nitrate Nitrite Asbestos | Inthetic Organics Vo All 30 All Except Dioxin Partial Dioxin Only | latile Organics All 21 Partial LAB CERTIF | Disinfection Byproducts Trihalomethanes Haloacetic Acids Chlorite Bromate | Radionuclides Single Sample Otrly Composite* | Secondaries All 14 Partial |
| | | LAB CERTIF | ICATION | | |
| | nifer Mazen Print Name | · | Project Manag | jer | , do HEREBY CERTIFY |
| that all attached analytical data a | | et all requirements of the | (Print Title) e National Environmental I | aboratory Accreditation Conf | erence (NELAC) |
| | fu 11 mayor | | Date: | 09/04/2024 | oronos (NEEDO). |
| possible enforcement against | current Florida DOH lab certific t the public water system for fail ample dates & locations for each | ure to sample, and may | ent Analyte Sheet for the a result in notification of the | uttached analysis results will r DOH Bureau of Laboratory S | esult in rejection of the repor ervices. |
| co | NFIRMATION & NOTIFICATION IS | REQUIRED WITHIN 24 H | RS FOR NITRATE OR NITRI | TE MCL EXCEEDANCES | |
| NON-DETECTS AF | RE TO BE REPORTED AS THE MO | L WITH "U" QUALIFIER. | (Non-detects reported as *B | DL" or with a "<" are not accepta | able.) |
| COMPLIANCE DETERMINA | TION(to be completed by DEP | or DOH attach notes a | as necessary) | | |
| Sample Collection & Analysis | Satisfactory: Yes N | lo | Replacement Sample o | r Report Requested (circle o | r highlight group(s) above) |
| Person Notified: | | Date Notified: | DEP | /DOH Reviewing Official: | |
| Reporting Format 62-550.730 Effective January 1995, Revised Dec | cember 2012 | Pag | ge: 8 of 11 | | |

*Results must be reported with appropriate qualifers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, * are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: L2400257001

Disinfectant Residual (mg/L):

1.16

PWS ID (From Page 1):

628-0304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Regulatory MRL** | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|-------------------------------|-----|-------|--------------------|------------|----------------------|------------|---------------------|------------------|------------------|----------------------------|
| 2450 | Monochloroacetic Acid | N/A | ug/L | 1.01 | | EPA 552.2 | 0.89 | 2 | 08/31/2024 | 19:57 | E82574 |
| 2451 | Dichloroacetic Acid | N/A | ug/L | 2.01 | | EPA 552.2 | 0.89 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2452 | Trichloroacetic Acid | N/A | ug/L | 3.93 | | EPA 552.2 | 0.67 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2453 | Monobromoacetic Acid | N/A | ug/L | 0.52 | U | EPA 552.2 | 0.52 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2454 | Dibromoacetic Acid | N/A | ug/L | 1.67 | | EPA 552.2 | 0.73 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2456 | Total Haloacetic Acids (HAA5) | 60 | ug/L | 8.62 | | EPA 552.2 | 0.89 | | 08/31/2024 | 19:57 | E82574 |

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Regulatory MRL** | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|------------------------------|-----|-------|--------------------|------------|----------------------|------------|---------------------|------------------|------------------|----------------------------|
| 2941 | Chloroform | N/A | ug/L | 7.51 | | EPA 524.2 | 0.32 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2942 | Bromoform | N/A | ug/L | 0.45 | U | EPA 524.2 | 0.45 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2943 | Bromodichloromethane | N/A | ug/L | 5.06 | | EPA 524.2 | 0.42 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2944 | Dibromochloromethane | N/A | ug/L | 2.67 | | EPA 524.2 | 0.37 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2950 | Total Trihalomethanes (TTHM) | 80 | ug/L | 15.24 | | EPA 524.2 | 0.45 | | 08/28/2024 | 05:47 | E84589 |

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

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

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

Laboratories that use EPA Methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 µg/L MRL for bromate.

| (II | Advanced Environmental | Laborateries, Inc. | Altamon Fort Myr Jackson Tallahas | ers: 1310 wille: 60 | 00 Westlinks Te 381 Southpoint I | rrace, Ste. 10, F Pkwy., FL 32216 | L 33913 • 239.67 i • 904.363.9350 | 4 8130 • Lab i • Lab iO: E82: | lD: E84492 174 | 3076 | | | Galnesvi Wiramar: Tampa: 9 | 102 | | | | 11111 | IIII | |
|-------------------|--|----------------------|-----------------------------------|------------------------|-------------------------------------|--------------------------------------|--|----------------------------------|-----------------------|---------------------|---|------------------------|----------------------------------|-------|------------|----------|----------|--------------|-------------|------------|
| Client Name: US | S Water | | Project Name: | | The Woo | odlands | | | BOTTLE SIZE & TYPE | 2 | 5_ | | | - 1 | 1 | | 400 | | 1 | |
| Address: 48 | 38 Cross Bayou | | Project Number | er; | Disinfect | tion By-P | roducts | | UTTO8 | 40mlCG lot223002 | 40mtAG lot 22330033 | | | | | | | | | |
| Ne | w Port Richey,FL | | PO Number: | | | | | | | 4.2 | 4.5 | | | | | | | | | œ |
| Phone: | 727-848-8292 | | FDEP Facility | No: | PWS ID | 0284075 | 5 628-0 | 0304 | RED | | | | | | | | | | | NUMBER |
| FAX: | 727-849-4219 | | FDEP Facility | y Addr: | | | | | l la | | | | | | | | | | | 3 |
| Contact: | Tonya Luning | | | | iot 5 | he elin | # (Pr) | | 3.86 | | | | | | | | | | | I.D. P |
| Sampled By: | Li Berish | | Special Instru | uctions: | | | | | ANALYSIS REQUIRED | | | | | | | | | | | Σ. |
| Turn Around Time: | Standard X | Rush | NaThio 2KJ0416 | O, NH4CI | 1KC0410 | | | | NAL | _ | | | | | | | | | | O.R. |
| AEL Profile #: | | | ADaPT | | EQuiS | | Other | | Q. | THM | HAA | | | | | H | CIS | | | ZA. |
| SAMPLE ID | SAMPLE | DESCRIPTION | | Grab Comp | SAM | PLING | MATRIX | NO. | Preservation | T | NH4CI | | | | | | | | | LABORATORY |
| TTH N/ HAAS | Men's restr | um (a) Pooi | | G | 8-/1 | 7 00 | DW | 6 | Fixered? | X | X | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | 001 |
| | | | | | | | | | | | | | | | | | | | | |
| Received on ice | WW=wastewater SW=sur Wes No 17/2 bb Form last revised 07/2 | emp taken from sampi | water DW=di | lrinking v | n blank 🛄 | Where | soil SL=slur e required, p neasuring T | H checke | đ | Temp. w | hen receiv | ed (observ | red)_3 | 1 | °C Ten | np. when | received | (corrected | 3. | |
| | elinquished by: | Date Time | 6 | Reco | eived by: | | Date | Time (10) | | (When Conta | DR DRI PWS Inform act Person: r of Water; | NKING nation not or | WAT | ER US | E: | 5384150 | 7, 07 | in. ur. | , iv p | . 18 |



Advanced Environmental Laboratories, Inc. 125 Tower ST. Lake Placid, FL 33852 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (863) 655-4022

FINAL

Workorder: The Woodlands DBP (L2400257)

September 04, 2024

Melisa Rotteveel **US Water Services** 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: L2400257 The Woodlands DBP

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Monday August 19, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

If you have any questions concerning this report, please feel free to contact me.

Sincerely.

Jennifer Mazen, Project Manager

Semmen managen

JMazen@aellab.com





Advanced Environmental Laboratories, Inc 125 Tower ST. Lake Placid, FL 33852 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580 Phone: (863) 655-4022

FINAL

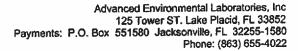
Workorder: The Woodlands DBP (L2400257)

Sample Summary

| | | | | | | Analytes | |
|-------------|-----------------------|--------|-----------|------------------|------------------|----------|-------|
| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Reported | Basis |
| L2400257001 | Mens Restroom at Pool | DW | EPA 524.2 | 08/19/2024 09:00 | 08/19/2024 10:25 | 5 | NA |
| L2400257001 | Mens Restroom at Pool | DW | EPA 552.2 | 08/19/2024 09:00 | 08/19/2024 10:25 | 6 | NA |

HORIZON







Workorder: The Woodlands DBP (L2400257)

QC Results Qualifiers

Parameter Qualifiers

The compound was analyzed for but not detected.

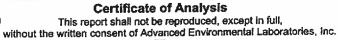
The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. I

Lab Qualifiers

DOH Certification #E82574 (FL NELAC) AEL-Jacksonville J

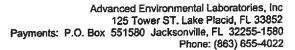
DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville

DOH Certification #E84589 (FL NELAC) AEL-Tampa Т



POWENED BY HORIZON'







Workorder: The Woodlands DBP (L2400257)

QC Results

QC Batch: Preparation Method:

GCSj/6854

EPA 552.2

Associated Lab IDs: L2400257001

Analysis Method: EPA 552.2

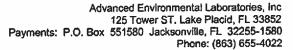
Method Blank(5453504)

| | | The second secon | Marie States and American | | |
|-------------------------------|---------|--|---|------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| Chloroacetic Acid | 0.89 U | ug/L | 1.0 | 0.89 | J |
| Bromoacetic Acid | 0.52 U | ug/L | 1.0 | 0.52 | J |
| Dichloroacetic Acid | 0.89 U | ug/L | 1.0 | 0.89 | J |
| Trichloroacetic Acid | 0.67 U | ug/L | 1.0 | 0.67 | J |
| Dibromoacetic Acid | 0.73 U | ug/L | 1.0 | 0.73 | j |
| Total Haloacetic Acids (HAA5) | 0.89 U | ug/L | 1.0 | 0.89 | j |

Surrogates

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|-------------------------------|-------|---------------|--------------|----------------|----------------|-----|
| 2.3-Dibromopropionic Acid (S) | ug/L | 20 | 24 | 120 | 70 - 130 | J |







Workorder: The Woodlands DBP (L2400257)

QC Results

QC Batch: MSVt/9919

Preparation Method: EPA 524.2 Associated Lab IDs: L2400257001 Analysis Method: EPA 524.2

Method Blank(5455752)

| Parameter | Results | Units | PQL | MDL | Lab |
|-----------------------|---------|-------|-----|------|-----|
| Chloroform | 0.32 U | ug/L | 1.0 | 0.32 | Т |
| Bromodichloromethane | 0.42 U | ug/L | 1.0 | 0.42 | T |
| Dibromochloromethane | 0.37 ป | ug/L | 1.0 | 0.37 | T |
| Bromoform | 0.45 U | ug/L | 1.0 | 0.45 | T |
| Total Trihalomethanes | 0.45 U | ug/L | 1.0 | 0.45 | Т |

Surrogates

| | 14.44 | | O-71- D14 | Calles Deserved | Company I Innian | 1 ab |
|---------------------------|-------|---------------|--------------|-----------------|------------------|------|
| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
| 1,2-Dichloroethane-d4 (S) | ug/L | 50 | 55 | 110 | 70 - 130 | Т |
| Bromofluorobenzene (S) | ug/L | 50 | 52 | 105 | 70 - 130 | T |
| Toluene-d8 (S) | ug/L | 50 | 52 | 103 | 70 - 130 | T |

HORIZON





Advanced Environmental Laboratories, Inc. 125 Tower ST. Lake Placid, FL 33852 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (863) 655-4022

FINAL

Workorder: The Woodlands DBP (L2400257)

QC Cross Reference

| Lab ID | Sample ID | Prep Batch | Prep Method |
|-----------------------|-----------------------|---|-------------|
| GCSJ/6854 - EPA 552.2 | | Total Control of the | |
| L2400257001 | Mens Restroom at Pool | GCSj/6853 | EPA 552.2 |
| MSV1/9919 - EPA 524.2 | | | |
| L2400257001 | Mens Restroom at Pool | | |





| System Name: The Woodlands of Lake Placid | | PWS I.D. #; 628-0304 |
|--|--|--|
| System Type (check one): Community Address: 100 Shoreline Dr. | □Nontransient Noncommunity | Transient Noncommunity |
| City: Lake Placid | ZIP Code: | 33852 |
| Phone # 727-848-8292 Fax #: 727-849-421 | 0 | |
| SAMPLE INFORMATION (to be completed by sample | | |
| Sample Number: <u>\UZY 00 257 001</u> S | ample Date:8-19-24 | Sample Time: 9:00AM PM (Circ |
| Sample Location (be specific): Men's restroom @ F | cool | Location Code: |
| Disinfectant Residual (Required when reporting results for | rihalomethanes and haloacetic acids): 1-16 mg/l | |
| Sample Type (Check Only One) | Reason(s) for Samp | ple (Check all that apply) |
| Distribution | ☑Routine Compliance with 62-550 | Replacement (of Invalidated Sample) |
| ☐Entry Point (to Distribution) | Confirmation of MCL Exceedance | Special (not for compliance with 62-550) |
| ☐Plant Tap (not for compliance with 62-550) | ☐Composite of Muttiple Sites | ☐Clearance (permitting) |
| Raw (at well or intake) | Other | The state of the s |
| | Sampling Procedure Used or Other Comm | |
| ☐Ave Residence Time | | |
| ☐Near First Customer | DBPS | |
| | *See 62-550,500(6) for requirements and restri And 62-550,512(3) for nitrate or nitrite exceeds | stions **See 62-550.550(4) for requirements and whoes, attach a results page for each site. |
| | SAMPLER CERTIFICATION | 4 |
| L Christopher Berish | Lead Operator | de LIEDEDY OFFITTI |
| (Print Name) | (Print | Title) , do HEREBY CERTIFY |
| that the above public water system and sample collection | • | , |
| Signature: Chuichelin Renge / U.S. Water | Date: | 8-19-24 |
| Certified Operator #_B28149 Phone #: 863-991- | 1828 Samo | eler's Fax #: |
| Sampler's E-mail: Cjberish@uswatercorp.net | | |

LABORATORY CERTIFICATION INFORMATION to be completed by lab - please type or print legibly)

| Lab Name:Advanc | ed Environmental Laboratori | es, Inc. Florida DOH Certification | n #:E851195 | Certification Expiration (| Date: 06/30/2025 |
|---|--|---|---|---|------------------------------|
| | | | ATTACH CURRENT | DOH ANALYTE SHEET* | |
| Address: 125 To | wer St., Lake Placid, FL 3385 | <u> </u> | Phone #: (863) 6 | 55-4022 | |
| Were any analyses | s subcontracted Yes | No If yes, please provide I | DOH certification nu | ımber(s): <u>E84589,E82574</u> | |
| | | | ATTACH DOH ANA | LYTE SHEET FOR EACH SU | IBCONTRACTED LAB |
| ANALYSIS INFOR | RMATION (to be completed by | lab) Date Sample(s) Received: | 08/19/2024 | | |
| PWS ID: (From Page | ge 1): 628-0304 | Sample Number (From Page 1) | L2400257001 | Lab Assigned Report # O | r Job ID:L2400257 |
| Group(s) Analyzed | I & Results attached for comp | oliance with Chapter 62-550, F.A.C. | (Check all that apply): | | |
| Inorganics All except Asbes Partial Nitrate Nitrite | synthetic Organics All 30 All Except Dioxin Partial Dioxin Only | □All 21 | sinfection Byproducts Trihatomethanes Haloacetic Acids Chlorite Bromate | Radionuclides Single Sample Otrly Composite* | Secondaries All 14 Partial |
| Asbestos | | LAB CERTIFIC | ATION | | |
| l, | Jennifer Mazen | , | Project Man | ager | , do HEREBY CERTIFY |
| | (Print Name | | (Print Title) | | _ |
| that all attached ana | lytical data are correct and unles | ss noted meet all requirements of the N | ational Environmenta | Laboratory Accreditation Co | nference (NELAC). |
| Signature: | Teremen 11 mayor | | Date: _ | 09/04/2024 | |
| ** Please provide ra | ment against the public water sy adiological sample dates & locati CONFIRMATION & NOTI | FICATION IS REQUIRED WITHIN 24 HRS | ult in notification of th | e DOH Bureau of Laboratory RITE MCL EXCEEDANCES | Services. |
| | | AS THE MDL WITH "U" QUALIFIER. (| | "BDL" or with a "<" are not accep | table.) |
| | | ted by DEP or DOH attach notes as r | necessary) | | |
| Sample Collection | & Analysis Satisfactory: | Yes No | Replacement Sample | or Report Requested (circle | or highlight group(s) above) |
| Person Notified: | | Date Notified: | DE | P/DOH Reviewing Official: | |
| Reporting Format 62-5 | 550.730 | Page · | 3 of 11 | | |

Effective January 1995, Revised December 2012

^{*}Results must be reported with appropriate qualifiers in accordance with Florida Administration Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, * are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

DISINFECTION BYPRODUCTS 62-550.310(3)

Report Number / Job ID: L2400257001

Disinfectant Residual (mg/L):

1.16

PWS ID (From Page 1):

628-0304

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Regulatory MRL** | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|-------------------------------|-----|-------|--------------------|------------|----------------------|------------|---------------------|------------------|------------------|----------------------------|
| 2450 | Monochloroacetic Acid | N/A | ug/L | 1.01 | | EPA 552.2 | 0.89 | 2 | 08/31/2024 | 19:57 | E82574 |
| 2451 | Dichloroacetic Acid | N/A | ug/L | 2.01 | | EPA 552.2 | 0.89 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2452 | Trichloroacetic Acid | N/A | ug/L | 3.93 | | EPA 552.2 | 0.67 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2453 | Monobromoacetic Acid | N/A | ug/L | 0.52 | U | EPA 552.2 | 0.52 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2454 | Dibromoacetic Acid | N/A | ug/L | 1.67 | | EPA 552.2 | 0.73 | 1 | 08/31/2024 | 19:57 | E82574 |
| 2456 | Total Haloacetic Acids (HAA5) | 60 | ug/L | 8.62 | | EPA 552.2 | 0.89 | | 08/31/2024 | 19:57 | E82574 |

| Contam ID | Contam Name | MCL | Units | Analysis Result | Qualifier* | Analytical Method | Lab MDL | Regulatory MRL** | Analysis Date | Analysis Time | DOH Lab Certification # |
|--------------|------------------------------|-----|-------|--------------------|------------|----------------------|------------|---------------------|------------------|------------------|----------------------------|
| 2941 | Chloroform | N/A | ug/L | 7.51 | | EPA 524.2 | 0.32 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2942 | Bromoform | N/A | ug/L | 0.45 | U | EPA 524.2 | 0.45 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2943 | Bromodichloromethane | N/A | ug/L | 5.06 | | EPA 524.2 | 0.42 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2944 | Dibromochloromethane | N/A | ug/L | 2.67 | | EPA 524.2 | 0.37 | 1 | 08/28/2024 | 05:47 | E84589 |
| 2950 | Total Trihalomethanes (TTHM) | 80 | ug/L | 15.24 | | EPA 524.2 | 0.45 | | 08/28/2024 | 05:47 | E84589 |

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

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

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

Laboratories that use EPA Methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 µg/L MRL for bromate.

| | Advanced Environment | al Laborati | ories, Inc. | ☐ For | Myers; 131 ksonville; 8 | 00 Wesilinks Te 881 Southpoint | rrace, Ste. 10, F1 Pkwy., FL 32216 | L 33913 • 239.67 • 904.363.9350 | 4 8130 • Lab I • Lab IO: E825 | D: E84492 174 | 3076 | | | Miramar: | 102 | | | | | | |
|---------|---|---|---|--|---|--|--|--|---|--|---|---|----------------------------------|----------------------------------|---|------------------------|--|---|--|--|---|
| US Wate | er | | | Project N | ате: | The Wo | odlands | | | E SIZE | - 8 | - E | | | Γ | 1 | | 400 | | , | 1 |
| 4838 Cn | oss Bayou | | | Project N | umber: | Disinfec | tion By-P | roducts | | טנדוטנ גר ג | Omico ozzao | 0mIAG 230003 | | | | | | | | | |
| New Por | t Richey,FL | | | PO Numi | ben: | | | | | | 4.3 | 40 | | | | | | | | | œ |
| 727- | 848-8292 | | | FDEP F | cility No: | PWS ID | 0284075 | 628-6 | 304 | RED | | | | | | | | | | | NUMBER |
| 727- | 849-4219 | | | FDEP F | acility Addr: | 1 | | | | l oc | | | | | | | | | | | 3 |
| Ton | /a Luning | | | | | 100 8 | he elin | g. 47F | | SRE | | | | | | | | | | | |
| 4. | Berish | | | Special | Instructions: | | | | | YSI | | | | | | | | | | | ₹ |
| : SI | andard X | Rush | | NaThio 2 | C10410 , NH4CI | 1KC0410 | | | | ANA IANA | 5 | d | | | | | | | | | 5 |
| t | | | | ADaP' | Γ | EQuIS | | Other | | | | I A | | | | | 표 | 당 | | | ₩. |
| ID | SAMPLE | DESCR | RIPTION | | Grab Comp | DATE | | MATRIX | NO. | Preservation | T | NH4CI | | | | | | | | | LABORATORY I.D. |
| AS IN | en's rest | reem (| Fooi | | G | 8-17 | 900 | DW | 6 | Progress | X | Х | | | | | | | | | 001 |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| web Fom | n last revised 07 hed by: | Temp taker /26/2022 Date | GW=ground In from sampl | water D | Temp fro | m blank 🖸 Device | Where | e required, p | H checker emp by ur Time | d nique ident e | Temp. w | rhen receiv e IR temp g OR DRI | ed (obse jun used) NKIN(| J: 9A | G: LT- | *C Te 1 LT-2 SE: | T; 10A | A: 3A | d (corrected | j) 3. | 1 00 |
| 1 | 14838 Cro New Por 727- 727- Tony St ID AS PM Relinquisi | Environments US Water 4838 Cross Bayou New Port Richey,FL 727-848-8292 727-849-4219 Tonya Luning Standard X ID SAMPLE AS Mach's Fest | Environmental Laborat US Water 4838 Cross Bayou New Port Richey,FL 727-848-8292 727-849-4219 Tonya Luning Sc. SL Standard x Rush ED SAMPLE DESCR | Environmental Laboratories, Inc. US Water 4838 Cross Bayou New Port Richey,FL 727-848-8292 727-849-4219 Tonya Luning Standard x Rush Environmental Laboratories, Inc. Page 1989 Tonya Luning Standard x Rush Environmental Laboratories, Inc. 1828-8292 18 | Environmental Laboratories, Inc. Jac Jac Jac | Fort Myers: 151 Jacksonville: 8 Jacksonvil | Fort Myers: 13100 Westinks To Jacksonville: 8831 Sumpoint Jacksonville: 8838 Cross Bayou | Fort Myers: (3100 Westinks Terrors, Siz. 10, Fort Myers: (3100 W | Havanced Environmental Laboratories, Inc. | Fort Myers; 13100 Westins Torrow, Siz. 10, R. 33913-239.574 8130-1.abi Date Date | Fort Myers: 1510 Weather Terror, St. 10, R. 33913 - 238,574 sto: - Lab ID: ESH462 | Environmental Laboratories, Inc. Jacksonville: 881 Sonoprin Pary, P. 3216 - 904 353300 - Lab D: E3274 Tallahassee: 2879 North Movine St. Sale D, P. 3200 - 992 19474 - Lab D: E311095 JS Water | Environmental Laboratories, Inc. | Environmental Laboratories, Inc. | ### Part New Port Richey, FL Standard x Rush | ### Address | Gainseaville: Gainseaville | For March Sample Sample | Continued Environmental Laboraturies, Inc. Continued Conti | Continuental Laturatories, Inc. Continuental Tenses, See No. 1991-7981491-1-1-19 Environmental Laturatories, Inc. Continuental Co | Environmental Laberaturias, Inc. Detail Mentals Construction Construction |



Advanced Environmental Laboratories, Inc 125 Tower ST. Lake Placid, FL 33852 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580 Phone: (863) 655-4022

FINAL

Workorder: The Woodlands DBP (L2400257)

September 04, 2024

Melisa Rotteveel US Water Services 4939 Cross Bayou Blvd. New Port Richey, FL 34652

RE: Workorder: L2400257 The Woodlands DBP

Dear Melisa Rotteveel:

Enclosed are the analytical results for sample(s) received by the laboratory on Monday August 19, 2024. Results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. The analytical results for the samples contained in this report were submitted for analysis as outlined by the Chain of Custody and results pertain only to these samples.

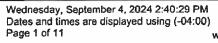
If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Jennifer Mazen, Project Manager

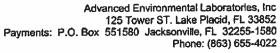
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JMazen@aellab.com









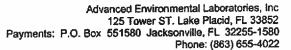


Workorder: The Woodlands DBP (L2400257)

Sample Summary

| | | | | | | Analytes | |
|-------------|-----------------------|--------|-----------|------------------|------------------|----------|-------|
| Lab ID | Sample ID | Matrix | Method | Date Collected | Date Received | Reported | Basis |
| L2400257001 | Mens Restroom at Pool | DW | EPA 524.2 | 08/19/2024 09:00 | 08/19/2024 10:25 | 5 | NA |
| L2400257001 | Mens Restroom at Pool | DW | EPA 552.2 | 08/19/2024 09:00 | 08/19/2024 10:25 | 6 | NA |







Workorder: The Woodlands DBP (L2400257)

QC Results Qualifiers

Parameter Qualifiers

U The compound was analyzed for but not detected.

The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit. ł

Lab Qualifiers

DOH Certification #E82574 (FL NELAC) AEL-Jacksonville J

DOD-ELAP Certification #L23-514 (ISO/IEC 17025:2017) AEL-Jacksonville

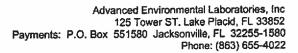
Т DOH Certification #E84589 (FL NELAC) AEL-Tampa

Wednesday, September 4, 2024 2:40:29 PM Dates and times are displayed using (-04:00) Page 3 of 11

Certificate of Analysis This report shall not be reproduced, except in full, without the written consent of Advanced Environmental Laboratories, Inc.









Workorder: The Woodlands DBP (L2400257)

QC Results

QC Batch: GCSj/6854 Preparation Method:

EPA 552.2

Associated Lab IDs: L2400257001

Analysis Method: EPA 552.2

Method Blank(5453504)

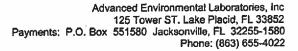
| | Company of the Compan | | | | | | | | |
|-------------------------------|--|-------|-----|------|-----|--|--|--|--|
| Parameter | Results | Units | PQL | MDL | Lab | | | | |
| Chloroacetic Acid | 0.89 U | ug/L | 1.0 | 0.89 | J | | | | |
| Bromoacetic Acid | 0.52 U | ug/L | 1.0 | 0.52 | J | | | | |
| Dichloroacetic Acid | 0.89 U | ug/L | 1.0 | 0.89 | J | | | | |
| Trichloroacetic Acid | 0.67 U | ug/L | 1.0 | 0.67 | J | | | | |
| Dibromoacetic Acid | 0.73 U | ug/L | 1.0 | 0.73 | J | | | | |
| Total Haloacetic Acids (HAA5) | 0.89 U | ug/L | 1.0 | 0.89 | J | | | | |

Surrogates

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|-------------------------------|-------|---------------|--------------|----------------|----------------|-----|
| 2 3-Dihromonropionic Acid (S) | uo/l | 20 | 24 | 120 | 70 - 130 | J |









Workorder: The Woodlands DBP (L2400257)

QC Results

QC Batch: Preparation Method:

MSVt/9919

EPA 524.2

Associated Lab IDs: L2400257001

Analysis Method: EPA 524.2

| Method Blank(5455752) | | | | | |
|-----------------------|---------|-------|-----|------|-----|
| Parameter | Results | Units | PQL | MDL | Lab |
| Chloroform | 0.32 U | ug/L | 1.0 | 0.32 | T |
| Bromodichloromethane | 0.42 U | ug/L | 1.0 | 0.42 | T |
| Dibromochloromethane | 0.37 ป | ug/L | 1.0 | 0.37 | Т |
| Bromoform | 0.45 U | ug/L | 1.0 | 0.45 | Т |
| Total Trihalomethanes | 0.45 U | ug/L | 1.0 | 0.45 | Т |

Surrogates

| Parameter | Units | Spiked Amount | Spike Result | Spike Recovery | Control Limits | Lab |
|---------------------------|-------|---------------|--------------|----------------|----------------|-----|
| 1,2-Dichloroethane-d4 (S) | ug/L | 50 | 55 | 110 | 70 - 130 | Т |
| Bromofluorobenzene (S) | ug/L | 50 | 52 | 105 | 70 - 130 | T |
| Toluene-d8 (S) | ug/L | 50 | 52 | 103 | 70 - 130 | T |

POWERED BY HORIZON





Advanced Environmental Laboratories, Inc. 125 Tower ST. Lake Placid, FL 33852 Payments: P.O. Box 551580 Jacksonville, FL 32255-1580

Phone: (863) 655-4022

FINAL

Workorder: The Woodlands DBP (L2400257)

QC Cross Reference

| Lab ID | Sample ID | Prep Batch | Prep Method |
|-----------------------|-----------------------|------------|-------------|
| GCSJ/6854 - EPA 552.2 | | | |
| L2400257001 | Mens Restroom at Pool | GCSj/6853 | EPA 552.2 |
| MSVV9919 - EPA 524.2 | | | |
| L2400257001 | Mens Restroom at Pool | | |





MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| | for instructions | ion for the Month Ye | ear of | November | 2023 | | | | | |
|-----------------|---------------------|-------------------------|--------------|--------------|-------------------|---|--------------|--------------|--|---------|
| | v Water System (C | | car or | Woodlands | of Lake Placid/LP | Vater Works | | *** | | |
| | er System (PWS) | | | 628-0304 | | | | | | |
| | Plant I Name WTP | Plant 2 Name WTP | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day of Month | 200,000 | tem (PWS) Name: 200,000 | | | | | | | | |
| | | tem (PWS) Name: | | | | | /e : | | | |
| Day 1 | 17,000 | 0 | | | | | | | | 17,000 |
| Day 2 | 22,000 | 598 | | | | | | | | 22,598 |
| Day 3 | 19,000 | 0 | | | | | | | | 19,000 |
| Day 4 | 25,000 | 0 | | | | | | | | 25,000 |
| Day 5 | 25,000 | 0 | | | | | | | | 25,000 |
| Day 6 | 20,000 | 646 | | | | | | | | 20,646 |
| Day 7 | 31,000 | 175 | | | | | | | | 31,175 |
| Day 8 | 23,000 | 0 | | | | | | | | 23,000 |
| Day 9 | 23,000 | 319 | | | | | | | | 23,319 |
| Day 10 | 23,000 | 0 | | | | | | | | 23,000 |
| Day 11 | 30,000 | 2,239 | | | | | | | | 32,239 |
| Day 12 | 30,000 | 2,239 | | | | | | | | 32,239 |
| Day 13 | 25,000 | 2,125 | | | | | | | | 27,125 |
| Day 14 | 22,000 | 2,670 | | | | | | | | 24,670 |
| Day 15 | 31,000 | 1,659 | | | | | | | | 32,659 |
| Day 16 | 44,000 | 2,448 | | | | | | - 11. | THE STATE OF THE S | 46,448 |
| Day 17 | 23,000 | ō | | | | | | | | 23,000 |
| Day 18 | 26,000 | 1,375 | | | | | | | | 27,375 |
| Day 19 | 26,000 | 1,375 | | | | | | | | 27,375 |
| Day 20 | 22,000 | 2,120 | | | | | | 1 | | 24,120 |
| Day 21 | 27,000 | 7,133 | | | | | | | | 34,133 |
| Day 22 | 28,000 | 710 | | | | | | | | 28,710 |
| Day 23 | 35,000 | 0 | | | | | | | | 35,000 |
| Day 24 | 24,000 | 0 | | | | | | | | 24,000 |
| Day 25 | 24,000 | 0 | | | | | | | | 24,000 |
| Day 26 | 24,000 | 0 | | | | | | | | 24,000 |
| Day 27 | 37,000 | 0 | | | | | | | | 37,000 |
| Day 28 | 20,000 | 0 | | | | | | | | 20,000 |
| Day 29 | 27,000 | 0 | | | | | | | | 27,000 |
| Day 30 | 27,000 | 0 | | - | | | | | | 27,000 |
| Day 31 | 27,000 | | | | | | | | | 27,000 |
| Total | - | | | | | San | | | | 807,831 |
| - | | | | | | | | | | 26,928 |
| Avg. Min | - | | | | | | | | | |
| IMILI | | | | | | | | | | 46,448 |





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

Effective August 28, 2003

| I. General Information for the | | 2023 | | | | |
|--|--|---|---|--|---|--|
| A. Public Water System (PW) | | | | | | |
| | nds of Lake Placid/LP Water Works | | | PWS Ide | entification Number: | 628-0304 |
| | nity [X] NonTransitent [] | | mmunity [] | | secutive | |
| | ections at End of Month: 440 | Total P | opulation Served at | End of Month: | 800 | |
| PWS Owner:LP Wat | erworks | | | | | |
| Contact Person: Share | n Purviance | Contact | Person's Title: U | S Water Service | es | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | City: No | ew Port Richey | State: FL | Zip Code: 346. | 52 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contact | Person's Fax Numbe | r: 727-849-4219 | | |
| Contact Person's Email A | Address: spurviance@uswatercorp.ne | et | | | | |
| B. Water Treatment Plant Inf | ormation | | | | | |
| Plant Name: WTP | | | | Plant Telepho | one Number: | |
| Plant Address: 1525 US | Highway 27 S | City: 1 | Lake Placid | State: FL | Zip Code: 338 | 362 |
| Type of water treated by | Plant: [X] Raw Ground []] | Purchased Finished Water | ſ | | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons pe | er dav: 200000 | | | | |
| | ection 62-699.310(4), F.A.C.): D | | ass (per subsection 6 | 2-699.310(4), F.A | A.C.): V | |
| Licensed Operators: | Name: | License Class | License Number | Day(s)/Shift(s) | Worked | |
| Lead/Chief Operators: | Christopher Berish | С | 28149 | | | 4 |
| Other Operators: | Dennis Coates | C | 26770 | | | |
| | Dustin Williams | A | 22520 | | | |
| | | | | | | |
| | | | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| H. Certification by Lead/Ch | ef Operator | | | | | |
| information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | tment plant operator licensed in Florida, report is true and accurate to the best of other applicable standard referenced in ensed operator staffed or visited this planment process performance records. Furtopies of this report, at a convenient location | f my knowledge and belief. I a subsection 62-555.320(3), F at during the month indicated ther more, I agree to provide | certify that all drinking. A.C. I also certify the labove: (1) records of | ng water treatmen at the following a of amounts of che | nt chemicals used at the additional operations re emicals used and chem | is plant conform to NSF ecords for this plant were lical feed rate, and (2) if |
| Christopher Berish | 12/4/2023 | Christopher Berish | | | C 28149 | |
| Signature and Date | | Printed or Typed Nan | ne | | License | e Number |
| DEP Form 62-555 900(300) | | | | | | |

PWS Identification Number:

628-0304

26,000

44,000

Average Maximum

Woodlands of Lake Placid/LP Water Works

WTP

III. Daily Data for the Month/Year of: November 2023

Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Other (Discribe) UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* UV Dose CT Calculations Emergency or Abnormal Days Plant Operating Conditions, Repair Lowest CT Provided Staffed or Lowest Lowest Residual Disinfectant or Maintenance Work that visited by Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Custome Manamum CT Operating UV Net Quantity of Lowest Residual Disinfectant Involves Taking Water Minimum UV Dose Required, Concentration at Remote Point System Components Out of Day of the operator Hours Plant in Finished Water at C Measurement Point During Peak Flow, Required, mg-Dose. mW-First Customer During Peak Temp of Peak Flow Rate, and sec/cm² Month Place "X" Operation Produced, gal Flow, mg/L During Peak Flow, minutes Water °C pH of Water, if Applicable min/L mW-sec/cm2 in Distribution System, mg/L Operation 1 X 2417,000 1.45 1.26 2 X 24 22,000 1.58 1.17 3 X 24 19,000 1.43 1.12 4 X 24 25,000 1.26 1.07 5 24 25,000 6 X 24 20.000 1.07 0.937 X 2431,000 1.36 0.87 8 X 24 23,000 1.28 1.09 9 X 24 23,000 1.38 1.16 X 10 24 23,000 1.27 1.09 11 X 24 30.000 1.38 1.00 12 24 30,000 13 X 24 25,000 1.47 1.15 14 X 24 22.000 1.30 1.11 15 X 24 31.000 1.28 1.07 16 X 24 44,000 1.59 1.20 17 X 24 23,000 1.38 1.11 18 X 24 26,000 1.26 1.05 19 24 26,000 20 X 24 22,000 1.70 1.08 21 X 2427.000 1.31 1.14 22 \mathbf{X} 24 1.40 28,000 1.09 23 X 24 35,000 1.50 1.08 24 X 24 24,000 1.49 1.15 25X 24 24,000 1.60 1.28 26 24 24,000 27 X 24 37,000 1.50 1.18 28 X 24 20,000 2.10 1.28 29 X 24 27.000 2.00 1.27 30 X 24 27.000 1.10 1.18 31 780,000 Total



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

| I. General Information for th | | 2023 | | | | | | |
|---------------------------------------|---|-----------------------------|-------------------------------------|--------------------|---|--|--|--|
| A. Public Water System (PWS | | | | | | | | |
| | nds of Lake Placid/LP Water Works | | PWS Identification Number: 628-0304 | | | | | |
| PWS Type: Commun | | | mmunity [] | | secutive | | | |
| | ections at End of Month: 440 | Total P | opulation Served at | End of Month: 8 | 800 | | | |
| PWS Owner: LP Wate | | | .). — W. 100 - 1000 (M.) \. | | | | | |
| Contact Person: Sharo | | | | IS Water Service | | | | |
| | Address: 4939 Cross Bayou Boulevard | | | State: FL | Zip Code: 34652 | | | |
| Contact Person's Telepho | one Number: 866-753-8292 | 1 | Person's Fax Numbe | r: 727-849-4219 | | | | |
| Contact Person's Email A | ddress: spurviance@uswatercorp.ne | et | | | | | | |
| . Water Treatment Plant Info | ormation | | | | | | | |
| Plant Name: WTP | | | | Plant Telepho | one Number: | | | |
| Plant Address: 1525 US | Highway 27 S | City: I | ake Placid | Zip Code: 33862 | | | | |
| Type of water treated by | | Purchased Finished Water | | State: FL | | | | |
| · · · · · · · · · · · · · · · · · · · | y Operating Capacity of Plant, gallons po | | | *-, - | | | | |
| | ection 62-699.310(4), F.A.C.): D | | uss (per subsection 6 | 2-699 310(4) F A | A C): V | | | |
| Licensed Operators: | Name: | License Class | License Number | | | | | |
| Lead/Chief Operators: | Christopher Berish | C | 28149 | Day (5)/SIMIL(5) | YY O'RCU | | | |
| Other Operators: | Dennis Coates | C | 26770 | | verse | | | |
| Outer Operators. | Dustin Williams | A | 22520 | | | | | |
| | Savett ** ******************************** | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | - | | | | |
| | | | | | | | | |
| | | | | | | | | |
| II. Certification by Lead/Chi | ef Operator | | | | | | | |
| 40000 | | 1 1 11110 | | | | | | |
| | | | | | in Part 1 of this report. I certify that the | | | |
| | | | | | nt chemicals used at this plant conform to NS | | | |
| | | | | | additional operations records for this plant we emicals used and chemical feed rate, and (2) i | | | |
| | | | | | o the PWS owner so that the PWS owner car | | | |
| | ppies of this report, at a convenient locati | | mese additional ope | rations records to | o the 1 w/3 owner so that the 1 w/3 owner car. | | | |
| retain them, together with co | ples of this report, at a convenient location | ion for the last ten years. | | | | | | |
| Christopher Berish | 12/4/2023 | Christopher Berish | | | C 28149 | | | |
| Signature and Date | | Printed or Typed Nam | nc | | License Number | | | |
| 9 | | | | | | | | |
| DEP Form 62-555 900(300) | | | | | | | | |

PWS Identification Number:

628-0304

928

7,133

Average Maximum

Woodlands of Lake Placid/LP Water Works

__ WTP

III. Daily Data for the Month/Year of:

November 2023

Means of Achieving Four-Log Virus Inactivation/Removal *

* Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Other (Discribe) Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Finergency or Abnormal Days Plant perating Conditions, Repair Staffed or Lowest CT Provided Lowest Lowest Residual Disinfectant or Maintenance Work that visited by Net Quantity of Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Custome Operating UV Involves Taking Water Manimum CT Lowest Residual Disinfectant Minimum UV Dose Required. Concentration at Remote Point System Components Out of Day of the operator Hours Plant in Finished Water First Customer During Peak at C Measurement Point During Peak Flow, Required mg-Dose, mW-Temp of sec/cm² Month Place "X" Operation Produced, gal Peak Flow Rate, gpd Flow, mg/L During Peak Flow, minutes mg-min/L Water of Water of Applicable mW-sec/cm2 in Distribution System, mg/L Operation X 24 () 1.30 1 1.00 2 X 598 24 1.13 0.93 3 X 24 0 1.21 1.06 4 X 24 0 1.28 1.10 5 24 0 6 24 646 1.31 1.04 7 X 24 175 1.26 1.07 8 X 24 0 1.20 1.00 9 X 24 319 1.30 1.04 10 X 24 0 1.24 1.03 11 X 24 2,239 1.10 0.90 12 24 2.239 13 X 2.125 24 1.26 1.0514 X 24 2,670 1.34 1.06 15 X 24 1.659 1.08 0.91 16 X 0.97 24 2,448 0.80 17 X 24 0 1.26 1.07 18 X 241,375 1.30 1.06 19 1.375 24 20 X 24 2.120^{+} 1.38 1.04 21 X 24 7,133 1.46 1.17 22 X 24 710 1.26 1.03 23 X 24 0 1.32 1.01 24 X 0 24 1.28 0.90 25 X 0 24 1.28 0.80 26 24 0 27 0 X 24 1.29 0.80 28 X 24 0 1.28 0.80 29 X 0 24 1.28 0.80 30 0 X 24 1.28 0.80 31 27,831 Total



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| | Water System (C er System (PWS) | Vame: | | 6280304 | of Lake Placid/LP V | | | | | |
|---------------------------|------------------------------------|--|--|--------------|---------------------|--|--|--------------|--------------|---------|
| | Plant 1 Name WTP | Plant 2 Name WTP | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant 9 Name | Total |
| Day Month | 200,000 | tem (PWS) Name: 200,000 | <u> </u> | | | | | <u> </u> | | |
| | | tem (PWS) Name: | | | | | | | | |
| Day 1 | 31,000 | 10,232 | | | | | | | | 41,232 |
| Day 2 | 23,000 | 7,941 | | | | | | | | 30,941 |
| Day 3 | 27,000 | 9,095 | | | | | | | | 36,095 |
| Day 4 | 27,000 | 11,943 | | | | | | | | 38,943 |
| Day 5 | 18,000 | 5,202 | | | | | | | | 23,202 |
| Day 6 | 33,000 | 10,039 | | | | | | | | 43,039 |
| Day 7 | 33,000 | 10,039 | | | | | | | | 43,039 |
| Day 8 | 20,000 | 9,081 | | | | | | | | 29,081 |
| Day 9 | 18,000 | 8,664 | | | | 1 | | | | 26,664 |
| Day 10 | 22,000 | 7,069 | - | | | | | | | 29,069 |
| Day 11 | 25,000 | 14,101 | | | | | | | | 39,101 |
| Day 12 | 20,000 | 8,320 | | | | | | | | 28,320 |
| Day 13 | 24,000 | 7,737 | | | | | | | | 31,737 |
| Day 14 | 24,000 | 7,737 | | | | | | | | 31,737 |
| Day 15 | 20,000 | 8,806 | | | | The second rate of the late of the second rate of t | The state of the s | | | 28,806 |
| Day 16 | 25,000 | 8,294 | | | | | | | | 33,294 |
| Day 17 | 22,000 | 6,652 | | | | | | | | 28,652 |
| Day 18 | 15,000 | 8,381 | | | | | | | | 23,381 |
| Day 19 | 27,000 | 21,918 | | | | | | | | 48,918 |
| Day 20 | 19,000 | 8,031 | | | | | | | | 27,031 |
| Day 21 | 19,000 | 8,031 | | | | | | | | 27,031 |
| Day 22 | 19,000 | 12,290 | | | | | | | | 31,290 |
| Day 23 | 26,000 | 8,221 | | | | | | | | 34,221 |
| Day 24 | 22,000 | 5,082 | | | | | | | | 27,082 |
| Day 25 | 21,000 | 8,465 | | | | | ******* | | | 29,465 |
| Day 26 | 21,000 | 3,162 | | | - | | | | | 24,162 |
| Day 27 | 27,000 | 3,177 | | | | | | | | 30,177 |
| Day 28 | 27,000 | 3,177 | | | | | | | | 30,177 |
| Day 29 | 26,000 | 3,249 | | | | | | | | 29,249 |
| Day 30 | 22,000 | 8,786 | | | | | -1- | | | 30,786 |
| Day 31 | 1 22,000 | 0,700 | | | - | | | | | 00,760 |
| Total | 1 | the state of the s | The second secon | | | | | | | 955,922 |
| CONSTRUCTION OF THE PARTY | | | | | | | | | | |
| Avg. | 1 | | | | | | | | | 31,864 |





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

Effective August 28, 2003

| I. General Information for tl | | 24 | | | |
|-------------------------------|---|--------------------------------|------------------------|-----------------------|--|
| A. Public Water System (PWS | | | | | 77 |
| | nds of Lake Placid/LP Water Works | 7. | · | | tification Number: 6280304 |
| PWS Type: Commun | · · · · — | | ommunity [] | Conse | |
| | ections at End of Month: 440 | Total | Population Served at 1 | End of Month: 80 | 00 |
| PWS Owner: LP Wat | | | | | |
| Contact Person: Sharo | | | | S Water Services | |
| | Address: 4939 Cross Bayou Bouleva | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | 1 | Person's Fax Number | r: 727-849-4219 | |
| Contact Person's Email A | ddress: spurviance@uswatercorp | o.net | | | |
| B. Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP | | | | Plant Telephor | ne Number: |
| Plant Address: 1525 US | Highway 27 S | City: | Lake Placid | State: FL | Zip Code: 33862 |
| Type of water treated by | | Purchased Finished Wate | er | | • |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons | <u> </u> | | | |
| | ection 62-699.310(4), F.A.C.): D | | lass (per subsection 6 | 2-699.310(4), F.A. | C.): V |
| Licensed Operators: | Name: | License Class | License Number | | (F) 14 |
| Lead/Chief Operators: | Christopher Berish | C | 28149 | 25 dy (b)/ DIAL(b) | Vortect |
| Other Operators: | Dennis Coates | C | 26770 | | |
| | | | | | |
| All the second | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| II. Certification by Lead/Chi | ef Operator | | | | |
| part | | da any the lead/chief operator | of the water treatmen | t plant identified in | n Part 1 of this report. I certify that the |
| | | | | | chemicals used at this plant conform to NSF |
| | | | | | Iditional operations records for this plant were |
| | | | | | nicals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| retain them, together with co | ppies of this report, at a convenient loc | cation for the last ten years. | • | | |
| Christopher Berish | 5/2/2024 | Christopher Berish | | | C 28149 |
| | | Dainta J T 1 M | | | Tiesen a NY1 |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DEP Form 62-555 900(300) | | | | | |

PWS Identification Number:

23,433

33,000

Average

Maximum

Woodlands of Lake Placid/LP Water Works

WTP

III. Daily Data for the Month/Year of:

April 2024

Means of Achieving Four-Log Virus Inactivation/Removal * Other (Discribe) Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant Operating Conditions, Repair Lowest CT Provided Staffed or Lowest Lowest Residual Disinfectant or Maintenance Work that visited by Concentration (C) Before or at Disinfectant Contact Time (T) Before or at First Customer Manmum CT Operating UV Net Quantity of Lowest Residual Disministrati Involves Taking Water Required, mg-Minimum UV Dose Required. Concentration at Remote Point System Components Out of operator Hours Plant m Finished Water First Customer During Peak at C Measurement Point During Peak Flow, Day of the Temp of Peak Flow Rate and mW-sec/cm² Month Place "X" Operation Produced, gal Flow, mg/L During Peak Flow, minutes mg-min/L Water °C pH of Water, if Applicable in Distribution System, mg/L Operation 24 31,000 1.24 1.02 1 X X 1.26 1.00 2 24 23,000 3 X 24 27,000 1.38 1.06 4 X 24 27,000 1.09 0.90 5 X 24 18,000 1.30 1.04 6 Х 24 33.000 0.92 1.11 7 24 33,000 8 X 24 20,000 1.69 1.22 9 X 2418,000 2.00 1.3510 X 24 22.000 1.48 1.07 11 X 24 25,000 1.21 0.94 12 X 24 20,000 1.08 1.20 13 X 24,000 24 1.68 0.97 14 24 24.000 1.5 \mathbf{X} 24 20,000 1.33 1.02 X 16 2425,000 1.44 1.09 17 X 24 22,000 1.06 0.96 18 X 24 15,000 1.37 1.18 19 X 24 27.000 1.451.20 20 X 24 19,000 1.49 1.22 21 24 19,000 22 X 24 19,000 1.38 1.16 23 X 24 26,000 1.43 1.10 24 X 24 22,000 1.34 1.06 25 X 24 21.000 1.36 1.11 26 X 24 21,000 1.27 1.06 27 X 2427,000 1.18 0.99 28 24 27,000 29 X 24 26,000 1.32 1.08 30 X 24 22,000 1.17 0.98 31 703,000 Total



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

Effective August 28, 2003

| Public Water System (PWS) Information PWS Name: Woodlands of Lake Placid/LP Water Works PWS Type: Community [X] NonTransitent [] NonCommunity [] Consecutive Number of Service Connections at End of Month: 440 PWS Type: Contact Person's Service Connections at End of Month: 440 PWS Qwner: LP Waterworks Contact Person's Mailing Address: 4939 Cross Bayou Boulevard City: New Port Richey State: FL Zip Code: 34652 Contact Person's Mailing Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699-310(4), F.A.C.): V Licensed Operators: Dennis Coates CC 128149 Other Operators: Dennis Coates Ccrtification by Leat/Clief Operators LCcrtification by Leat/Clief Operators PCC 26770 CCCRTITICATION Number: 6280304 POST Contact Person's Title: US Water Services Contact Person's Title: US Water Services Contact Person's Title: US Water Services Contact Person's Fax Number: 727-849-4219 Plant Telephone Number: | |) Information | | | | |
|--|--|--|--|--|--|--|
| PWS Type: Community X NonTransitent NonCommunity Consecutive Number of Service Connections at End of Month: 440 Total Population Served at End of Month: 800 PWS Owner: LP Waterworks Contact Person: Sharon Purviance Contact Person: Sitaton Purviance Contact Person: Sharon Purviance Contact Person: Sharon Purviance Contact Person: Sharon Number: 866-753-8292 Contact Person: Season: Season | PWS Name: Woodlar | | | | PWS Ider | ntification Number: 6280304 |
| Number of Service Connections at End of Month: 440 PWS Owner: LP Waterworks Contact Person: Sharon Purvance Contact Person's Mailing Address: 4939 Cross Bayou Boulevard City: New Port Richey State: FL Zip Code: 34652 Contact Person's Telephone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number C 28149 Other Operators: Christopher Berish C 28149 Other Operators: Christopher Berish C 286770 | | | NonCon | munity [] | | |
| PWS Owner: LP Waterworks Contact Person's Mailing Address: 4939 Cross Bayou Boulevard City: New Port Richey State: FL Zip Code: 34652 Contact Person's Telephone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Online Coates Contact Person's Title: US Water Services Contact Person's Title: US Water Services City: New Port Richey State: FL Zip Code: 34652 Contact Person's Fax Number: 727-849-4219 Plant Calcense Full Plant Calcens | | | | | End of Month: 8 | 00 |
| Contact Person's Mailing Address: 4939 Cross Bayou Boulevard City: New Port Richey State: FL Zip Code: 34652 Contact Person's Telephone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Christopher Berish C 26770 | PWS Owner: LP Wat | erworks | | | | |
| Contact Person's Telephone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Demnis Coates C 26770 Demnis Coates C 26770 Contact Person's Fax Number: 727-849-4219 Plant Telephone Number: P | The state of the s | | Contact P | erson's Title: U | S Water Services | |
| Contact Person's Telephone Number: 866-753-8292 Contact Person's Fax Number: 727-849-4219 Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Demnis Coates C 26770 Demnis Coates | Contact Person's Mailing | Address: 4939 Cross Bayou Boulevard | City: Nev | v Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Email Address: spurviance@uswatercorp.net Water Treatment Plant Information Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name: License Class License Number Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Dennis Coates C 26770 Plant Telephone Number: State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked C 28149 Other Operators: Operators: Operators: Dennis Coates C 26770 | | | Contact P | erson's Fax Numbe | r: 727-849-4219 | • |
| Plant Name: WTP Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Other Operators: Oth | | | | | | |
| Plant Name: WTP Plant Address: 1525 US Highway 27 S Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Dennis Coates C 26770 | Water Treatment Plant Inf | ormation | | | | |
| Plant Address: 1525 US Highway 27 S City: Lake Placid State: FL Zip Code: 33862 Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Other Operators: Dennis Coates C 26770 Other Operators: Other Operato | | | | | Plant Telephor | ne Number: |
| Type of water treated by Plant: [X] Raw Ground [] Purchased Finished Water Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Licensed Operators: Name: Lead/Chief Operators: Christopher Berish Other Operators: Dennis Coates C 28149 C 26770 | | Highway 27 S | City: La | ke Placid | | |
| Permitted Maximum Day Operating Capacity of Plant, gallons per day: 200000 Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Other Operators: Christopher Berish C 26770 Other Operators: Capacity of Plant, gallons per day: 200000 Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Capacity of Plant, gallons per day: 200000 Plant Class (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Capacity of Plant, gallons per day: 200000 C 28149 Other Operators: Capacity of Plant, gallons per day: 200000 C 28149 Other Operators: Capacity of Plant, gallons per day: 200000 C 28149 Other Operators: Capacity of Plant, gallons per day: 200000 C 26770 | | | | | E-3331-3-37 | |
| Plant Category (per subsection 62-699.310(4), F.A.C.): D Plant Category (per subsection 62-699.310(4), F.A.C.): V Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked C 28149 Other Operators: Dennis Coates C 26770 | | | | | | |
| Licensed Operators: Name: License Class License Number Day(s)/Shift(s) Worked Lead/Chief Operators: Christopher Berish C 28149 Other Operators: C 26770 Dennis Coates C 26770 | | | | s (ner subsection 6 | 2-699 310(4) FA | C)· V |
| Lead/Chief Operators: Christopher Berish C 28149 Other Operators: Dennis Coates C 26770 | A ATT TOTAL AND TO THE ATT | | | | and the second contract of the second | * * * * * * * * * * * * * * * * * * * |
| Other Operators: Dennis Coates C 26770 | | | AND A SECURE OF THE PROPERTY AND A SECURE OF THE PERSON OF | | Day (s)/ Strict(s) | VOIRCU |
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| Certification by Lead/Chief Operator | o dici o portuoisi | D cames | | | | |
| . Certification by Lead/Chief Operator | | | | | | |
| . Certification by Lead/Chief Operator | | | | | | |
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| . Certification by Lead/Chief Operator | | | | <u> </u> | | ALAMANIA (AL |
| Certification by Lead/Chief Operator | | | | | | |
| | | | | | | |
| he undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in Part 1 of this report. I certify that the | Certification by Lead/Chi | ef Operator | | | | |
| | the undersigned water treat | ment plant operator licensed in Florida, a | un the lead/chief operator of | the water treatmen | t plant identified i | n Part 1 of this report. I certify that the |
| | the undersigned water treat formation provided in this | ment plant operator licensed in Florida, a report is true and accurate to the best of a | my knowledge and belief. I co | ertify that all drinki | ng water treatment | t chemicals used at this plant conform to ? |
| ternational Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plan | the undersigned water treat formation provided in this aternational Standard 60 or | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s | my knowledge and belief. I co subsection 62-555.320(3), F.A | ertify that all drinkind.C. I also certify th | ng water treatment at the following ac | t chemicals used at this plant conform to N Iditional operations records for this plant v |
| nternational Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rate, and | the undersigned water treat formation provided in this nternational Standard 60 or repared each day that a lice | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s nsed operator staffed or visited this plant | my knowledge and belief. I co subsection 62-555.320(3), F.A during the month indicated a | ertify that all drinkin A.C. I also certify the above: (1) records o | ng water treatment at the following ac f amounts of cher | t chemicals used at this plant conform to N dditional operations records for this plant v nicals used and chemical feed rate, and (2) |
| nternational Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rate, and opplicable, appropriate treatment process performance records. Further more, I agree to provide these additional operations records to the PWS owner so that the PWS owner. | the undersigned water treat formation provided in this aternational Standard 60 or repared each day that a lice oplicable, appropriate treat | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s unsed operator staffed or visited this plant ment process performance records. Furth | my knowledge and belief. I co subsection 62-555.320(3), F.A during the month indicated a er more, I agree to provide the | ertify that all drinkin A.C. I also certify the above: (1) records o | ng water treatment at the following ac f amounts of cher | t chemicals used at this plant conform to N dditional operations records for this plant v nicals used and chemical feed rate, and (2) |
| information provided in this report is true and accurate to the best of my knowledge and belief. I certify that all drinking water treatment chemicals used at this plant conform to international Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rate, and applicable, appropriate treatment process performance records. Further more, I agree to provide these additional operations records to the PWS owner so that the PWS owner eatin them, together with copies of this report, at a convenient location for the last ten years. | the undersigned water treat aformation provided in this atternational Standard 60 or repared each day that a lice pplicable, appropriate treat | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s unsed operator staffed or visited this plant ment process performance records. Furth | my knowledge and belief. I co subsection 62-555.320(3), F.A during the month indicated a er more, I agree to provide the | ertify that all drinkin A.C. I also certify the above: (1) records o | ng water treatment at the following ac f amounts of cher | t chemicals used at this plant conform to N dditional operations records for this plant v nicals used and chemical feed rate, and (2) |
| International Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rate, and applicable, appropriate treatment process performance records. Further more, I agree to provide these additional operations records to the PWS owner so that the PWS owner than them, together with copies of this report, at a convenient location for the last ten years. | the undersigned water treat aformation provided in this atternational Standard 60 or repared each day that a lice pplicable, appropriate treat etain them, together with co | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s used operator staffed or visited this plant ment process performance records. Furth pies of this report, at a convenient location | my knowledge and belief. I consubsection 62-555.320(3), F.A during the month indicated a ter more, I agree to provide the for the last ten years. | ertify that all drinkin A.C. I also certify the above: (1) records o | ng water treatment at the following ac f amounts of cher | t chemicals used at this plant conform to N dditional operations records for this plant v nicals used and chemical feed rate, and (2) the PWS owner so that the PWS owner c |
| nternational Standard 60 or other applicable standard referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant repared each day that a licensed operator staffed or visited this plant during the month indicated above: (1) records of amounts of chemicals used and chemical feed rate, and opplicable, appropriate treatment process performance records. Further more, I agree to provide these additional operations records to the PWS owner so that the PWS owner them, together with copies of this report, at a convenient location for the last ten years. | the undersigned water treat a formation provided in this neemational Standard 60 or repared each day that a lice opplicable, appropriate treatment them, together with confirmation of the policy of the confirmation of the confi | ment plant operator licensed in Florida, a report is true and accurate to the best of a other applicable standard referenced in s used operator staffed or visited this plant ment process performance records. Furth pies of this report, at a convenient location | my knowledge and belief. I consubsection 62-555.320(3), F.A during the month indicated a ter more, I agree to provide the for the last ten years. Christopher Berish | ertify that all drinkin. C. I also certify the above: (1) records onese additional ope | ng water treatment at the following ac f amounts of cher | t chemicals used at this plant conform to N dditional operations records for this plant v nicals used and chemical feed rate, and (2) the PWS owner so that the PWS owner c |

PWS Identification Number:

6280304

21,918

Maximum

Woodlands of Lake Placid/LP Water Works

III. Daily Data for the Month/Year of:

WTP

April 2024

Means of Achieving Four-Log Virus Inactivation/Removal *
UltraViolet Radiation Other (Discribe)

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

| | | | | | | CT Calculations, or U | IV Dose, to Demonstrate Fou | r-Log Virus In | activation, if Applicable* | | | | | |
|----------------|---|-----------------------------|--|---------------------|--|---|---|---------------------|-----------------------------|--|--|--|--|--|
| | | 87.0 | N-0 34 | | Mark and a | CT Calc | | | | | | UV Dose | The sale of the sale | Emergency or Abnormal |
| Day of the | Days Plant Staffed or visited by operator Place "X" | Hours Plant in Operation | Net Quantity of Finished Water Produced, gal | Peak Flow Rate; gpd | Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L | Districtant Contact Time (1) at C Measurement Point During Peak Flow, numutes | Lowest CT Provided Before or at First Customer During Peak Flow, me-min/L | Temp of Water °C | pH of Water, if Applicable | Minimum CT Required, mg- min/L | Lowest Operating UV Dose, mW- sec/em ² | Mπümum UV Dose Required, mW-sec/cm ² | Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, my L. | Operating Conditions, Repr or Maintenance Work that Involves Taking Water |
| 1 | X | 24 | 10,232 | reak row roate, and | 1.20 | During Feak Flow, number | mg-mast. | Water C | pti of water, it Applicable | IIIIDI. | secien | inw-sec/en | 0.88 | Орејани |
| 2 | X | 24 | 7,941 | | 1.14 | | | İ | | | | | 0.92 | |
| 3 | X | 24 | 9,095 | | 1.22 | | | | | 1 | | | 0.90 | |
| 4 | X | 24 | 11,943 | | 1.11 | | 1 | | | Ì | 1 | | 0.74 | |
| 5 | X | 24 | 5,202 | | 1.28 | | - | | | | | | 0.96 | |
| $\frac{-6}{6}$ | X | 24 | 10.039 | | 1.08 | | 1 | Ì | <u> </u> | Ì | | | 0.90 | |
| 7 | | 24 | 10,039 | | 1 | | | | | i | | | 0.50 | |
| 8 | X | 24 | 9.081 | | 1.45 | | | | | 1 | | | 0.93 | |
| 9 | X | 24 | 8,664 | | 1.50 | | | | | İ | | | 1.10 | |
| 10 | X | 24 | 7,069 | | 1.37 | | <u> </u> | | | 1 | | | 0.97 | |
| 11 | X | 24 | 14,101 | | 1.24 | | | | | <u>. </u> | - | | 0.83 | <u> </u> |
| 12 | X | 24 | 8,320 | | 1.41 | | | İ | 1 | | | | 1.08 | |
| 13 | X | 24 | 7,737 [| | 1.55 | | | | | | Ì | | 1.18 | |
| 14 | | 24 | 7,737 | |] | | 1 | | | | i | 1 | | |
| 15 | X | 24 | 8,806 | | 1.39 | | | İ | | | 1 | | 0.92 | 1 |
| 16 | X | 24 | 8,294 | | 1.32 | 1 | | Ì | | 1 | 1 | | 1.01 | |
| 17 | X | 24 | 6,652 | | 1.65 | | | | | | | | 1.21 | |
| 18 | X | 24 | 8,381 | | 1.35 | | ĺ | | | | | | 1.12 | |
| 19 | X | 24 | 21,918 | | 1.63 | | | Ì | | | | | 1.24 | |
| 20 | X | 24 | 8,031 | | 1.71 | | | 1 | | | | 1 | 1.32 | |
| 21 | | 24 | 8,031 | | | - | | 1 | | İ | | | | |
| 22 | X | 24 | 12,290 | | 1.86 | | | 1 | | | | | 1.43 | |
| 23 | X | 24 | 8,221 | | 0.97 | dam | | ĺ | 1 | | | | 0.74 | |
| 24 | X | 24 | 5,082 | | 1.41 | | | | 1 | | | | 1.04 | |
| 25 | X | 24 | 8,465 | | 1.34 | 1 | | | 1 | 1 | | | 1.10 | |
| 26 | X | 24 | 3,162 | | 1.29 | | | | 1 | | | | 1.07 | ĺ |
| 27 | LX | 24 | 3,177 | | 1.31 | | | 1 | | Ì | 1 | ĺ | 1.11 | |
| 28 | | 24 | 3,177 | | | | | Ĭ | | | 1 | | Ī | |
| 29 | X | 24 | 3,249 | | 1.23 | | 1 | 1 | | | | | 1.07 | 1 |
| 30 | X | 24 | 8,786 | | 1.25 | | | | | | 1 | | 1.04 | Ì |
| 31 | | | | | | | | | _ | 1 | | | | - The state of the |
| Fotal | | | 252,922 | | | | · | _ | | | | | | |
| | | | 0. | | | | | | | | | | | |



MONTHLY OPERATION REPORT FOR SUMMATION OF FINISHED WATER PRODUCTION BY CWSs THAT HAVE MULTIPLE PLANTS

| munity | Water System (C er System (PWS) I | ion for the Month Ye WS) Name: Name: | *************************************** | July 2024 Woodland 6280304 | s of Lake Placid/LP V | Vater Works | THE STATE OF STATE | , particular de la companya de la co | | |
|--------------|--------------------------------------|--|--|--|-----------------------|-----------------|--|--|--|---------|
| | Plant I Name WTP | Plant 2 Name WTP | Plant 3 Name | Plant 4 Name | Plant 5 Name | Plant 6 Name | Plant 7 Name | Plant 8 Name | Plant_9_Name | Total |
| Day Month | Public Water Sys | tem (PWS) Name: 200,000 | | | | | | | | |
| | Public Water Sys | tem (PWS) Name: | 5. Land 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | | |
| Day 1 | 29,000 | 3,477 | | | | | | | | 32,477 |
| Day 2 | 13,000 | 2,693 | | | | | | | | 15,693 |
| Day 3 | 22,000 | 1,328 | | | | | | | | 23,328 |
| Day 4 | 3,400 | 2,941 | | | | | | | | 6,341 |
| Day 5 | 15,000 | 0 | | | | | 1 | | | 15,000 |
| Day 6 | 24,000 | 2,845 | | | | | | | | 26,845 |
| Day 7 | 24,000 | 2,845 | | | | | | | | 26,845 |
| Day 8 | 27,000 | 0 | | | | | | | | 27,000 |
| Day 9 | 13,000 | 1,290 | | | | | | | | 14,290 |
| Day 10 | 14,000 | 1,218 | | | | | | | | 15,218 |
| Day 11 | 20,000 | 1,953 | | | | | | | | 21,953 |
| Day 12 | 17,000 | 351 | | | | | | | | 17,351 |
| Day 13 | 18,000 | 1,165 | | | | | | | | 19,165 |
| Day 14 | 18,000 | 1,165 | | | | | | | The state of the s | 19,165 |
| Day 15 | 42,000 | 0 | | 1 Tarrier 1 Tarr | | | | | | 42,000 |
| Day 16 | 15,000 | 5,865 | | 1 | | | | | | 20,865 |
| Day 17 | 0 | 18,741 | | | | | | | | 18,741 |
| Day 18 | 0 | 20,539 | | | | | | | | 20,539 |
| Day 19 | 0 | 18,056 | | | | | | | | 18,056 |
| Day 20 | 1,000 | 19,995 | | | | | | | | 20,995 |
| Day 21 | 1,000 | 19,995 | | | | | | | | 20,995 |
| Day 22 | 2,000 | 27,143 | | | | | | | | 29,143 |
| Day 23 | 19,000 | 0 | | | | | | | | 19,000 |
| Day 24 | 21,000 | 0 | | | | | | | | 21,000 |
| Day 25 | 18,000 | 0 | | | | | | | | 18,000 |
| Day 26 | 26,000 | 0 | | | | | | | | 26,000 |
| Day 27 | 30,000 | 0 | | | | | | | | 30,000 |
| Day 28 | 30,000 | 0 | | | | | | | | 30,000 |
| Day 29 | 11,000 | 0 | | | | | | | | 11,000 |
| Day 30 | 33,000 | 0 | | | | | | | | 33,000 |
| Day 31 | 12,000 | 0 | | | | | | | | 12,000 |
| Total | , | - | and the second s | - In the second | | Market Sail Co. | | | | 672,005 |
| Avg. | | | | | | | | | | 21,678 |
| Min | | | | | | | | | | 42,000 |





MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

| I. General Information for the | | | | | |
|--|---|--|---|--|---|
| A. Public Water System (PW) | | | | | 10 1 27 1 0000001 |
| | nds of Lake Placid/LP Water Works | N. C | · r 1 | | ntification Number: 6280304 |
| PWS Type: Commu | | | mmunity [] | | ecutive |
| | nections at End of Month: 440 | I otal I | opulation Served at | End of Month: 8 | |
| PWS Owner: LP Wat | | | D 4 777 1 7 | 10.111 | |
| Contact Person: Share | | | | S Water Services | |
| | Address: 4939 Cross Bayou Boulevard | | | State: FL | Zip Code: 34652 |
| | one Number: 866-753-8292 | A Committee of the Comm | Person's Fax Numbe | er: 727-849-4219 | |
| Contact Person's Email A | | t | | | |
| . Water Treatment Plant Inf | ormation | | | | |
| Plant Name: _WTP | | | | Plant Telepho | ne Number: |
| Plant Address: 1525 US | Highway 27 S | City: | Lake Placid | State: FL | Zip Code: 33862 |
| Type of water treated by | Plant: [X] Raw Ground [] F | Purchased Finished Water | r | | |
| Permitted Maximum Da | y Operating Capacity of Plant, gallons per | r day: 200000 | | | |
| | ection 62-699.310(4), F.A.C.): D | | ass (per subsection 6 | 2-699.310(4), F.A | C.): V |
| Licensed Operators: | Name: | License Class | License Number | | |
| Lead/Chief Operators: | Vincent Cautero | C | 30027 | | |
| Other Operators: | Christopher Berish | C | 28149 | | |
| | | | | | |
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| | | | | Programme and the second of th | |
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| II. Certification by Lead/Ch | ef Operator | | | | |
| information provided in this International Standard 60 or prepared each day that a lice applicable, appropriate treat | r other applicable standard referenced in ensed operator staffed or visited this plant | my knowledge and belief. I subsection 62-555.320(3), F during the month indicated ner more, I agree to provide | certify that all drinki A.C. I also certify the l above: (1) records of | ng water treatmen at the following a of amounts of che | in Part 1 of this report. I certify that the at chemicals used at this plant conform to NSI dditional operations records for this plant we micals used and chemical feed rate, and (2) if the PWS owner so that the PWS owner can |
| Vincent Cautero | 8/6/2024 | Vincent Cautero | | | C 30027 |
| Signature and Date | | Printed or Typed Nar | ne | | License Number |
| DED E 60 555 000/900\ | | | | | |

DEP Form 62-555 900(300) Effective August 28, 2003 PWS Identification Number:

16,723

42,000

Average Maximum

Woodlands of Lake Placid/LP Water Works WTP

III. Daily Data for the Month/Year of:

July 2024 Means of Achieving Four-Log Virus Inactivation/Removal *

Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

Other (Discribe) UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant perating Conditions; Repair Lowest CT Provided Staffed or Lowest Residual Disinfectant Lowest or Mantenance Work that visited by Before or at First Custome Operating UV Involves Taking Water Net Quantity of Concentration (C) Before or at Disinfectant Contact Time (T) Minimum CT Lowest Residual Dismectant operator Hours Plant in at C Measurement Point During Peak Flow, Required, mg-Dose mW-Minimum UV Dose Required, Concentration at Remote Point System Components Out of Day of the Finished Water First Customer During Peak Temp of Peak Flow Rate and sec/cm2 Month Place "X" Operation Produced, gal Flow, mg/L Durme Peak Flow, minutes mg-min/L Water, °C pH of Water, if Applicable min/L mW-sec/cm2 in Distribution System, mg/L Operation \mathbf{X} 24 1.30 1 29,000 1.01 0.94 2 X 24 13,000 1.16 3 X 24 22,000 1.39 1.03 4 X 24 3,400 1.17 0.90 5 X 24 15,000 1.441.10 6 X 24 24,000 1.36 1.06 7 24 24,000 8 X 24 27,000 1.27 0.99 9 X 24 13.000 1.29 1.02 10 X 24 14,000 1.14 0.97 11 X 24 20.000 1.31 1.12 12 X 24 17,000 1.08 0.87 13 X 24 18,000 1.12 0.90 14 24 18,000 15 X 24 42,000 1.14 0.91 X 16 24 15,000 1.24 0.96 17 X 24 01 1.21 0.94 0 18 X 24 1.13 0.9019 0 X 241.61 0.9420 X 24 1,000 2.14 1.34 21 24 1.000 22 2,000 X 24 3.20 2.40 23 X 19,000 24 2.12 - (1.53 24 X 2421,000 1.17 1 0.99 25X 24 18,000 1.14 0.96 26 X 24 26,000 1.24 1.04 27 X 24 30,000 1.25 1.10 28 24 30,000 29 X 24 11.000 1.18 1.01 24 30 X 33,000 1.07 0.87 31 X 24 12.000 1.31 1.14 518,400 Total



MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

See Page 4 for instructions

| Sec 1 age 4 for instructions | | | | | |
|-------------------------------|--|----------------------------------|-------------------------|----------------------|--|
| I. General Information for tl | ne Month/Year of: July 202 | 24 | | | |
| A. Public Water System (PWS | S) Information | | | | |
| PWS Name: Woodlar | nds of Lake Placid/LP Water Works | | | PWS Idea | ntification Number: 6280304 |
| PWS Type: Commun | nity [X] NonTransitent | [] NonC | ommunity [] | Conse | ecutive |
| Number of Service Conn | nections at End of Month: 440 | Total | Population Served at 1 | End of Month: 8 | 300 |
| PWS Owner: LP Wat | | | | | |
| Contact Person: Sharo | n Purviance | Contac | t Person's Title: U | IS Water Services | |
| Contact Person's Mailing | Address: 4939 Cross Bayou Boulev | rard City: N | lew Port Richey | State: FL | Zip Code: 34652 |
| Contact Person's Telepho | one Number: 866-753-8292 | Contac | t Person's Fax Numbe | r: 727-849-4219 | |
| Contact Person's Email A | Address: spurviance@uswatercorp | p.net | | | |
| B. Water Treatment Plant Inf | ormation | | | | |
| Plant Name: WTP | | | | Plant Telepho | ne Number: |
| Plant Address: 1525 US | Highway 27 S | City: | Lake Placid | State: FL | Zip Code: 33862 |
| Type of water treated by | | Purchased Finished Water | | , | |
| | y Operating Capacity of Plant, gallons | - | | | |
| | ection 62-699.310(4), F.A.C.): D | | class (per subsection 6 | 2-699 310(4) F A | C): V |
| Licensed Operators: | Name: | License Class | License Number | | 7 |
| Lead/Chief Operators: | Vincent Cautero | C | 30027 | Day (3)/ Other(3) | Violet |
| Other Operators: | Christopher Berish | Č | 28149 | | |
| outer operators. | emistopher Bensii | | | | |
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| | A. | | | | |
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| II. Certification by Lead/Chi | ef Operator | | | | |
| I the undersigned water trees | tmont plant operator licensed in Klar | ide any the land/alrief argentur | of the renter treetmen | t plant identified i | in Part 1 of this report. I certify that the |
| | | | | | it chemicals used at this plant conform to NSF |
| | | | | | dditional operations records for this plant were |
| | | | | | micals used and chemical feed rate, and (2) if |
| | | | | | the PWS owner so that the PWS owner can |
| | opies of this report, at a convenient lo | | e these additional ope | ranons records to | the I wo (wher so that the I wo owner can |
| ream them, together with ec | pres or this report, at a convenienc to | vention for the last ten years. | | | |
| Vincent Cautero | 8/6/2024 | Vincent Cautero | | | C 30027 |
| Signature and Date | | Printed or Typed Na | me | | License Number |
| DEP Form 69-555 900(300) | | | | | |

PWS Identification Number:

6280304

4.955

27,143

Average Maximum

Woodlands of Lake Placid/LP Water Works

WTP

III. Daily Data for the Month/Year of:

July 2024

Means of Achieving Four-Log Virus Inactivation/Removal * Other (Discribe) Free Chlorine

Chlorine Dioxide

Ozone

Combined Chlorine (Chloramines)

UltraViolet Radiation Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable* CT Calculations UV Dose Emergency or Abnormal Days Plant Operating Conditions, Repair Lowest CT Provided Staffed or Lowest Lowest Residual Disinfectant or Maintenance Work that visited by Concentration (C) Before or at Disinfectant Contact Time (1) Before or at First Custome Operating UV Net Quantity of Minimum CT Lowest Residual Disinfectant Involves Taking Water Day of the operator Hours Plant in Finished Water First Customer During Peak at C Measurement Point During Peak Flow, Temp of Required mg-Dose mW-Minimum UV Dose Required Concentration at Remote Point System Components Out of Produced, gal mg-min/L sec/cm² Peak Flow Rate, and During Peak Flow, minutes mW-sec/cm² Month Place "X" Operation Flow, mg/L Water, °C pH of Water, if Applicable in Distribution System, mg/L Operation 1 X 24 3,477 1.51 0.96 2 X 24 2,693 1.30 0.90 3 X 24 1,328 1.33 1.02 4 X 24 2,941 1.44 1.10 5 X 0 241.21 0.90 6 2.845 24 1.10 0.84 7 24 2.845 8 X 0 241.77 1.27 9 X 24 1.290 1.18 0.87 10 X 24 1.218 1.07 0.79 X 11 24 1.953 1.28 0.97 12 X 24 351 1.31 0.97 13 X 1.165 24 1.27 0.96 14 24 1.165 15 X 24 0 1.18 0.88 X 24 5,865 16 1.13 0.84 17 \mathbf{x} 24 18,741 1.52 1.16 18 X 24 20,539 2.20 1.98 19 X 2418,056 3.70 2.96 20 X 19.995 24 3.60 2.30 21 24 19.995 22 X 24 27.143 3.40 2.30 23 X 24 0 1.14 0.86 24 X 0 24 0.97 1.43 25 X 240 0.81 0.96 0 | 26 X 24 0.78 1.01 27 X 24 0 0.70 1.06 28 24 0 29 X 24 0 0.64 1.04 30 24 0 X 0.61 0.88 31 X 24 0.1 0.52 1.29 153,605 Total

PERMITTEE NAME: LP WATERWORKS, INC.

PERMIT NUMBER: FLA014340

ADDRESS: 4939 Cross Bayou Boulevard LIMIT: DW

FINAL REPORT:

Monthly

New Port Richey, FL 34652

FACILITY TYPE: MONITORING GROUP: R-001 GROUP:

Domestic

FACILITY:

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

LOCATION:

1525 US Highway 27 S

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

Lake Placid, FL 33852

COUNTY: HIGHLANDS

MONITORING PERIOD: From: 11/01/2023 To: 11/30/2023

| Parameter | | Quantity o | or Loading | Units | Qualit | y or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 7.2 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Anni Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | <2 | <2 | <2 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 2.4 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Anni Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | <1 | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity or Loading Units Quality or | | | | | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|--------------------------------------|--|--|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 5.5 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7.1 | | 7.7 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | S.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.6 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | <0.12 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units | Qualit | y or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|---|--|---|---|--|---|--|--------------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.007 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 17 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 218 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 202 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN. MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AG GATHERED ANI ERSONS WHO MA RMATION, THE I ATE AND COMP | CCORDANCE WIT DEVALUATED TO NAGE THE SYST INFORMATION ST PLETE, I AM AW | TH A SYSTEM DI HE INFORMATIO TEM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS: N SUBMITTED. I PERSONS DIREC) THE BEST OF RE ARE SIGNIFI | SURE THAT QUA BASED ON MY IN TLY RESPONSIB MY KNOWLEDO CANT PENALTI | ALIFIED OR AUTH NQUIRY LE FOR Electronic GE AND ES FOR | ORIZED AGENT | L EXECUTIV | | E SUBMITTED ON 92 12/14/2023 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 DW GROUP: FACILITY TYPE: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: **HIGHLANDS** MONITORING PERIOD: From: 11/01/2023 To: 11/30/2023 Frequency No. Sample Parameter Quantity or Loading **Quality or Concentration** Units Units Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + **Permit** Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER
MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED
PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED BASED ON MY INQUIRY
OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR ELectronically Signed

(727) 848-8292

12/14/2023

SUBMITTED ON
WY CONTROL OF PRINCIPAL EXECUTIVE OFFICER
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OR NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014340-006-DW3P From: 11/01/2023 To: 11/30/2023

Facility:

Lake Placid Camp Florida Resort WWTP (WOODLANDS)

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 2.0 | | 0.008 | | | | 7.6 | |
| 2 | | | 2.0 | | 0.007 | | | | 7.7 | |
| 3 | | | 2.5 | | 0.005 | | | | 7.6 | |
| 4 | | | 2.1 | | 0.006 | | | | 7.7 | |
| 5 | | | | | 0.006 | | | | | |
| 6 | | | 2.4 | | 0.007 | | | | 7.7 | |
| 7 | | | 2.0 | | 0.007 | | | | 7.7 | |
| 8 | | | 2.1 | | 0.009 | | | | 7.1 | |
| 9 | | | 2.2 | | 0.006 | | | | 7.6 | |
| 10 | | | 2.1 | | 0.009 | | | | 7.7 | |
| 11 | | | 1.7 | | 0.007 | | | | 7.6 | |
| 12 | | | | | 0.007 | | | | | |
| 13 | 218 | <2 | 1.6 | <1 | 0.009 | <0.12 | 202 | <1 | 7.7 | |
| 14 | | | 1.9 | | 0.010 | | | | 7.7 | |
| 15 | | | 1.7 | | 0.008 | | | | 7.6 | |
| 16 | | | 1.9 | | 0.005 | | | | 7.3 | |
| 17 | | | 1.8 | | 0.009 | | | | 7.4 | |
| 18 | | | 1.9 | | 0.008 | | | | 7.3 | |
| 19 | | | | | 0.009 | | | | | |
| 20 | | | 1.8 | | 0.008 | | | | 7.3 | |
| 21 | | | 1.9 | | 0.009 | | | | 7.4 | |
| 22 | | | 1.9 | | 0.006 | | | | 7.3 | |
| 23 | | | 1.8 | | 0.010 | | | | 7.4 | |
| 24 | | | 1.9 | | 0.007 | | | | 7.2 | |
| 25 | | | 1.9 | | 0.007 | | | | 7.4 | |
| 26 | | | | | 0.007 | | | | | |
| 27 | | | 2.1 | | 0.011 | | | | 7.4 | |
| 28 | | | 2.0 | | 0.007 | | | | 7.3 | |
| 29 | | | 2.0 | | 0.002 | | | | 7.4 | |
| 30 | | | 2.0 | | 0.007 | | | | 7.4 | |
| 31 | | | | | | | | | | |
| Total | 202 | <2 | | <1 | 0.223 | <0.12 | 202 | <1 | | |
| Mo. Avg. | 202 | <2 | | <1 | 0.007 | <0.12 | 202 | <1 | | |

| PLANT STAFFING: | | | | | | |
|------------------------|--------|----------|-----------------|-------|-------|-----------------|
| Day Shift Operator | Class: | <u>C</u> | Certificate No: | 22164 | Name: | Dustin Williams |
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS:

4939 Cross Bayou Boulevard

New Port Richey, FL 34652

FACILITY: LOCATION: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

1525 US Highway 27 S

Lake Placid, FL 33852

COUNTY:

HIGHLANDS

PERMIT NUMBER: FLA014340

LIMIT:

FINAL REPORT: FACILITY TYPE: DW

GROUP:

Monthly Domestic

MONITORING GROUP: R-001

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

MONITORING PERIOD: From: 12/01/2023 To: 12/31/2023

| Parameter | | Quantity or Loading Units Quality or Concentration | | | | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|--|--|--|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 6.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 3.9 | 3.9 | 2.5 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 2.2 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Anni Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | 2.8 | 1.7 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity or Loading Units | | | Qualit | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|---------------------------|--|--|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 3.4 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7 | | 7.4 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.7 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 0.66 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units | Qualit | y or Concei | itration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|---|--|---|--|---|---|--|-------------|----------------------------------|---|
| Flow | Sample Measurement | | 0.012 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 19 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 240 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 226 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN/ MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AGE GATHERED ANI CRSONS WHO MA RMATION, THE I ATE AND COMP | CCORDANCE WIT DEVALUATED TO NAGE THE SYST INFORMATION SI LETE. I AM AW | TH A SYSTEM DI HE INFORMATION EM, OR THOSE N JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS: N SUBMITTED. I PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QU BASED ON MY I TLY RESPONSIE MY KNOWLED ICANT PENALT: | ALIFIED OR AUTH NQUIRY BLE FOR GE AND IES FOR | RE OF PRINCIPA IORIZED AGENT ally Signed | AL EXECUTIV | TE OFFICER TELEPHON (727) 848-82 | SUBMITTED ON 92 01/12/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: **Biosolids Quantity** Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 12/01/2023 To: 12/31/2023 Frequency No. Sample Quantity or Loading Quality or Concentration Parameter Units Units of Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report (Calculated) dry tons (1 Monthly) Mon. Site: RMP-1 (Mo Total) Requirement Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report (1 Monthly) (Calculated) dry tons Mon. Site: RMP-2 Requirement (Mo Total) NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT SUBMITTED ON

Tonya Luning

PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

(727) 848-8292 01/12/2024

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014340-006-DW3P From: 12/01/2023

To: 12/31/2023

Facility:

Lake Placid Camp Florida Resort WWTP (WOODLANDS)

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 1.9 | | 0.014 | | | | 7.3 | |
| 2 | | | .,,, | | 0.014 | | | | | |
| 3 | | | 1.7 | | 0.014 | | | | 7.4 | |
| 4 | | | 1.8 | | 0.014 | | | | 7.4 | |
| 5 | | | 1.9 | | 0.009 | | | | 7.3 | |
| 6 | | | 1.9 | | 0.011 | | | | 7.4 | |
| 7 | | | 2.0 | | 0.013 | | | | 7.4 | |
| 8 | | | 2.0 | | 0.008 | | | | 7.4 | |
| 9 | | | 1.9 | | 0.008 | | | | 7.3 | |
| 10 | | | | | 0.008 | | | | | |
| 11 | | | 1.9 | | 0.008 | | | | 7.4 | |
| 12 | | | 1.9 | | 0.024 | | | | 7.4 | |
| 13 | | | 1.9 | | 0.014 | | | | 7.4 | |
| 14 | | | 1.9 | | 0.009 | | | | 7.4 | |
| 15 | | | 1.9 | | 0.009 | | | | 7.3 | |
| 16 | | | 1.9 | | 0.009 | | | | 7.4 | |
| 17 | | | | | 0.009 | | | | | |
| 18 | | | 1.9 | | 0.010 | | | | 7.3 | |
| 19 | 240 | 3.9 | 1.9 | <1 | 0.013 | 0.66 | 226 | 2.8 | 7.0 | |
| 20 | | | 2.2 | | 0.018 | | | | 7.4 | |
| 21 | 152 | <2 | 2.0 | <1 | 0.012 | <0.12 | 132 | <1 | 7.4 | |
| 22 | | | 2.4 | | 0.012 | | | | 7.4 | |
| 23 | | | 2.6 | | 0.010 | | | | 7.4 | |
| 24 | | | | | 0.010 | | | | | |
| 25 | | | 2.6 | | 0.006 | | | | 7.4 | |
| 26 | | | 2.4 | | 0.010 | | | | 7.4 | |
| 27 | | | 2.8 | | 0.016 | | | | 7.4 | |
| 28 | | | 2.6 | | 0.010 | | | | 7.4 | |
| 29 | | | 2.4 | | 0.020 | | | | 7.4 | |
| 30 | | | | | 0.017 | | | | 7.4 | |
| 31 | | | | | 0.014 | | | | | |
| Total | 392 | 4.9 | | | 0.373 | | 358 | 3.3 | | |
| Mo. Avg. | 196 | 2.5 | | | 0.012 | | 179 | 1.7 | | |

| PLANT STAFFING: Day Shift Operator | Class: | C Certificate No: | 22164 | Name: | Dustin Williams |
|---------------------------------------|----------|-------------------|-------|-------|-----------------|
| Evening Shift Operator | Class: _ | Certificate No: | | Name: | |
| Night Shift Operator | Class: | Certificate No: | | Name: | |
| ead Operator | Class: | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

1525 US Highway 27 S LOCATION:

Lake Placid, FL 33852

COUNTY:

FACILITY:

HIGHLANDS

PERMIT NUMBER: FLA014340

LIMIT:

FINAL REPORT: Monthly DW GROUP: FACILITY TYPE:

DESCRIPTION:

Domestic

MONITORING GROUP: R-001

Land application system consisting of two rapid infiltration basins.

MONITORING PERIOD: From: 01/01/2024 To: 01/31/2024

| Parameter | | Quantity o | or Loading | Units | Qualit | ty or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Anni Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 20 | 20 | 20 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 3.6 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 21 | 21 | 21 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units Quality or Concentration | | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|--------------------------------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 2.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7.4 | | 7.5 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 2 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 0.22 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Qualid | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|--|---|---|---|---|--|---------------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.015 | | | | | - | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 23 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 346 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 280 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN/ MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE. ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND RSONS WHO MAI RMATION, THE IN ATE AND COMPI | CORDANCE WIT EVALUATED TH NAGE THE SYST FORMATION SU LETE, I AM AWA | H A SYSTEM DI IE INFORMATIO EM, OR THOSE I IBMITTED IS, TO ARE THAT THE | SIGNED TO AS: N SUBMITTED. F PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QUA IASED ON MY IN TLY RESPONSIBI MY KNOWLEDG CANT PENALTIE | LIFIED OR AUTH QUIRY LE FOR Electronics E AND ES FOR | IORIZED AGENT | L EXECUTIV | | SUBMITTED ON 92 02/09/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 01/01/2024 To: 01/31/2024 Frequency No. Sample Parameter Quantity or Loading Units **Quality or Concentration** Units of Ex. Type Analysis **Biosolids Quantity** Sample 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 (Mo Total) Requirement Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED BASED ON MY INQUIRTY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM. OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 02/09/2024 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

Tonya Luning

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014340-006-DW3P From: 01/01/2024 To: 01/31/2024

Facility:

Lake Placid Camp Florida Resort WWTP (WOODLANDS)

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 |
| 1 | | | 2.2 | | 0.020 | | | | 7.5 |
| 2 | | | 2.3 | | 0.018 | | | | 7.5 |
| 3 | | | 2.6 | | 0.007 | | | | 7.5 |
| 4 | | | 2.4 | | 0.016 | | | | 7.5 |
| 5 | | | 2.1 | | 0.017 | | | | 7.5 |
| 6 | | | 2.2 | | 0.014 | | | | 7.5 |
| 7 | | | | | 0.014 | | | | |
| 8 | 346 | 20 | 2.4 | <1 | 0.010 | 0.22 | 280 | 21 | 7.4 |
| 9 | | | 2.3 | | 0.019 | | | | 7.4 |
| 10 | | | 2.5 | | 0.010 | | | | 7.4 |
| 11 | | | 2.6 | | 0.018 | | | | 7.4 |
| 12 | | | 2.2 | | 0.013 | | | | 7.4 |
| 13 | | | 2.1 | | 0.017 | | | | 7.4 |
| 14 | | | | | 0.017 | | | | |
| 15 | | | 2.4 | | 0.017 | | | | 7.4 |
| 16 | | | 2.1 | | 0.016 | | | | 7.4 |
| 17 | | | 2.2 | | 0.014 | | | | 7.4 |
| 18 | | | 2.1 | | 0.016 | | | | 7.4 |
| 19 | | | 2.3 | | 0.019 | | | | 7.4 |
| 20 | | | 2.5 | | 0.013 | | | | 7.4 |
| 21 | | | | | 0.013 | | | | |
| 22 | | | 2.1 | | 0.012 | | | | 7.4 |
| 23 | | | 2.4 | | 0.010 | | | | 7.4 |
| 24 | | | 2.4 | | 0.016 | | | | 7.4 |
| 25 | | | 2.3 | | 0.017 | | | | 7.4 |
| 26 | | | 2.1 | | 0.018 | | | | 7.4 |
| 27 | | | 2.0 | | 0.014 | | | | 7.4 |
| 28 | | | | | 0.014 | | | | |
| 29 | | | 2.1 | | 0.011 | | | | 7.4 |
| 30 | | | 2.2 | | 0.019 | | | | 7.4 |
| 31 | | | 2.1 | | 0.018 | | | | 7.4 |
| Total | 346 | 20 | | <1 | 0.467 | 0.22 | 280 | 21 | |
| Mo. Avg. | 346 | 20 | | <1 | 0.015 | 0.22 | 280 | 21 | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|---|-----------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS:

4939 Cross Bayou Boulevard

New Port Richey, FL 34652

FLA014340 FINAL REPORT:

Monthly

FACILITY TYPE: MONITORING GROUP: R-001

PERMIT NUMBER:

DW

Domestic

FACILITY:

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

LOCATION:

1525 US Highway 27 S

Lake Placid, FL 33852

DESCRIPTION:

LIMIT:

Land application system consisting of two rapid infiltration basins.

GROUP:

COUNTY:

HIGHLANDS

MONITORING PERIOD: From: 02/01/2024 To: 02/29/2024

| | | | | | | | MONT | OKING PEKI | טע: From | : 02/01/2024 10: 02/2 | .9/2024 |
|--|-----------------------|-------------|------------|-------|-------------------|--------------------|------------------|------------|------------|-----------------------------|----------------|
| Parameter | | Quantity of | or Loading | Units | Qualid | ty or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 4.6 | 4.6 | 4.6 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 3.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 3.8 | 3.8 | 3.8 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity (| or Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|-------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 2.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7.5 | | 7.5 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.5 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 0.35 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Qualit | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|---|--|--|--|---|--|--|---------------|-------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.015 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 28 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 99 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 76 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN. MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND ERSONS WHO MA RMATION, THE I ATE AND COMP | CORDANCE WIT DEVALUATED TO NAGE THE SYST NFORMATION ST LETE. I AM AW | TH A SYSTEM DO THE INFORMATION THOSE THOSE THE THOSE THE THE THE THE THE THE THE THE THE THE THE THE THE THE | ESIGNED TO AS: ON SUBMITTED. I PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QUA BASED ON MY II TLY RESPONSIB MY KNOWLEDG ICANT PENALTI | ALIFIED OR AUTH NOUIRY LE FOR Electronic GE AND ES FOR | IORIZED AGENT | AL EXECUTIV | | SUBMITTED ON 92 03/13/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork 1525 US Highway 27 S LOCATION: DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 02/01/2024 To: 02/29/2024 Frequency No. Sample Parameter **Quantity or Loading** Units **Quality or Concentration** Units of Ex. Type Analysis Biosolids Quantity Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (Calculated) (1 Monthly) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 Requirement (Mo Total) I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER
MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT
PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 03/13/2024 OF THE PERSONS OR PERSONS WHO MARAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

VIOLATIONS.

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period

FLA014340-006-DW3P From: 02/01/2024 To: 02/29/2024

Facility:

Lake Placid Camp Florida Resort WWTP (WOODLANDS)

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 |
| 1 | | | 2.8 | | 0.015 | | | | 7.5 |
| 2 | | | 2.2 | | 0.016 | | | | 7.5 |
| 3 | | | 2.3 | | 0.016 | | | | 7.5 |
| 4 | | | 210 | | 0.016 | | | | |
| 5 | | | 2.1 | | 0.018 | | | | 7.5 |
| 6 | | | 2.3 | | 0.015 | | | | 7.5 |
| 7 | | | 2.4 | | 0.015 | | | | 7.5 |
| 8 | | | 2.1 | | 0.018 | | | | 7.5 |
| 9 | | | 2.2 | | 0.017 | | | | 7.5 |
| 10 | | | 2.0 | | 0.013 | | | | 7.5 |
| 11 | | | | | 0.015 | | | | |
| 12 | | | 1.5 | | 0.016 | | | | 7.5 |
| 13 | | | 2.1 | | 0.014 | | | | 7.5 |
| 14 | | | 2.0 | | 0.013 | | | | 7.5 |
| 15 | | | 2.2 | | 0.017 | | | | 7.5 |
| 16 | | | 2.3 | | 0.018 | | | | 7.5 |
| 17 | | | 2.0 | | 0.018 | | | | 7.5 |
| 18 | | | | | 0.018 | | | | |
| 19 | | | 1.8 | | 0.014 | | | | 7.5 |
| 20 | | | 2.0 | | 0.010 | | | | 7.5 |
| 21 | | | 2.1 | | 0.014 | | | | 7.5 |
| 22 | 99 | 4.6 | 3.1 | <1 | 0.016 | 0.35 | 76 | 3.8 | 7.5 |
| 23 | | | 3.2 | | 0.019 | | | | 7.5 |
| 24 | | | 1.8 | | 0.013 | | | | 7.5 |
| 25 | | | | | 0.015 | | | | |
| 26 | | | 2.0 | | 0.016 | | | | 7.5 |
| 27 | | | 2.3 | | 0.021 | | | | 7.5 |
| 28 | | | 2.1 | | 0.008 | | | | 7.5 |
| 29 | | | 2.0 | | 0.014 | | | | 7.5 |
| 30 | | | | | | | | | |
| 31 | | | | | | | | | |
| Total | 99 | 4.6 | | <1 | 0.448 | 0.35 | 76 | 3.8 | |
| Mo. Avg. | 99 | 4.6 | | <1 | 0.015 | 0.35 | 76 | 3.8 | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|---|-------------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | _ Certificate No: | | Name: | |
| Night Shift Operator | Class: | | _ Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

1525 US Highway 27 S

Lake Placid, FL 33852

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

PERMIT NUMBER: FLA014340

LIMIT: FINAL REPORT: FACILITY TYPE: DW

Monthly GROUP: Domestic

MONITORING GROUP: R-001

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

COUNTY:

FACILITY:

LOCATION:

HIGHLANDS

MONITORING PERIOD: From: 03/01/2024 To: 03/31/2024

| Parameter | | Quantity (| or Loading | Units | Qualid | ty or Concent | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8.6 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 12 | 12 | 12 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 4.5 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 11 | 11 | 11 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity (| or Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|-------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 2.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| pН | Sample Measurement | | | | 7.4 | | 7.5 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.7 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | <0.023 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units | Qualit | ty or Concen | itration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|--|---|--|---|--|--|---------------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.015 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 30 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 397 | _ | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | _ | | 366 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN/ MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED ANI ERSONS WHO MA RMATION, THE I ATE AND COMP | CORDANCE WIT DEVALUATED TH NAGE THE SYST NFORMATION SU LETE. [AM AWA | H A SYSTEM DE HE INFORMATION EM, OR THOSE I JBMITTED IS, TO ARE THAT THE | SIGNED TO AS: N SUBMITTED. I PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QUA BASED ON MY IT TLY RESPONSIB MY KNOWLEDG ICANT PENALTI | ALIFIED OR AUTH NOUIRY LE FOR Electronic GE AND ES FOR | IORIZED AGENT | L EXECUTIV | TELEPHONI (727) 848-82 | SUBMITTED ON 02 04/11/2024 |

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PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork 1525 US Highway 27 S LOCATION: DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 03/01/2024 To: 03/31/2024 Frequency No. Sample Parameter **Quantity or Loading** Units **Quality or Concentration** Units of Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 Requirement (Mo Total) I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY NAME/TITLE PRINCIPAL EXECUTIVE OFFICER SUBMITTED ON OR AUTHORIZED AGENT Tonya Luning OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 04/11/2024 GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR

SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

DAILY SAMPLE RESULTS - PART B

Permit Number: Monitoring Period FLA014340-006-DW3P

From:

03/01/2024 TO: 03/31/2024 Facility:

Lake Placid Camp Florida Resort WWTP (WOODLANDS)

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 |
| 1 | | | 2.0 | | 0.015 | | | | 7.5 |
| 2 | | | 1.8 | | 0.015 | | | | 7.5 |
| 3 | | | | | 0.015 | | | | |
| 4 | | | 2.1 | | 0.014 | | | | 7.5 |
| 5 | | | 2.3 | | 0.022 | | | | 7.5 |
| 6 | | | 2.1 | | 0.017 | | | | 7.5 |
| 7 | | | 2.0 | | 0.012 | | | | 7.5 |
| 8 | | | 2.1 | | 0.018 | | | | 7.5 |
| 9 | | | 1.8 | | 0.016 | | | | 7.5 |
| 10 | | | | | 0.016 | | | | |
| 11 | | | 2.8 | | 0.016 | | | | 7.4 |
| 12 | 397 | 12 | 3.0 | <1 | 0.017 | <0.023 | 366 | 11 | 7.4 |
| 13 | | | 1.9 | | 0.010 | | | | 7.4 |
| 14 | | | 2.4 | | 0.019 | | | | 7.4 |
| 15 | | | 1.9 | | 0.016 | | | | 7.4 |
| 16 | | | 1.7 | | 0.018 | | | | 7.4 |
| 17 | | | | | 0.018 | | | | |
| 18 | | | 1.9 | | 0.012 | | | | 7.4 |
| 19 | | | 2.1 | | 0.014 | | | | 7.4 |
| 20 | | | 2.2 | | 0.014 | | | | 7.4 |
| 21 | | | 2.4 | | 0.013 | | | | 7.4 |
| 22 | | | 2.4 | | 0.018 | | | | 7.5 |
| 23 | | | 1.9 | | 0.014 | | | | 7.5 |
| 24 | | | | | 0.014 | | | | |
| 25 | | | 2.1 | | 0.005 | | | | 7.4 |
| 26 | | | 2.2 | | 0.022 | | | | 7.5 |
| 27 | | | 2.4 | | 0.009 | | | | 7.5 |
| 28 | | | 2.5 | | 0.016 | | | | 7.4 |
| 29 | | | 3.0 | | 0.018 | | | | 7.5 |
| 30 | | | 2.2 | | 0.010 | | | | 7.5 |
| 31 | | | | | 0.010 | | | | |
| Total | | | | | 0.463 | | | | |
| Mo. Avg. | | | | | 0.015 | | | | |

| PLANT STAFFING: Day Shift Operator | Class: | <u>c</u> (| Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|------------|-----------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | (| Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340

ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly

New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic

MONITORING GROUP: R-001 FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

Land application system consisting of two rapid infiltration basins. LOCATION: 1525 US Highway 27 S DESCRIPTION:

Lake Placid, FL 33852

COUNTY: HIGHLANDS MONITORING PERIOD: From: 04/01/2024 To: 04/30/2024

| WORLTOKING LINED. TIOH. OF OTLEGET TO. OF SUIZEET | | | | | | | | | | | |
|---|-----------------------|----------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| Parameter | | Quantity | or Loading | Units | Qualit | y or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8.8 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 3.5 | 3.5 | 3.5 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 4.7 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 2.8 | 2.8 | 2.8 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|-------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | 2.9 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Anni Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7.3 | | 7.6 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.8 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 0.42 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Quali | ty or Concen | itration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|---|--|---|---|---|--|--|---------------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.009 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 26 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 269 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 250 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN/ MY DIRECTION OR SUPPERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND RSONS WHO MAI RMATION, THE II ATE AND COMPI | CORDANCE WIT DEVALUATED TO NAGE THE SYST NFORMATION SU LETE. I AM AW. | H A SYSTEM DI HE INFORMATIO EM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS N SUBMITTED. I PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QUA BASED ON MY IN TLY RESPONSIB MY KNOWLEDG ICANT PENALTI | ALIFIED OR AUTH NOUIRY LE FOR Electronic DE AND ES FOR | IORIZED AGENT | L EXECUTIV | | SUBMITTED ON 02 05/14/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: **Biosolids Quantity** Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 04/01/2024 To: 04/30/2024 Frequency No. Sample Parameter **Quantity or Loading** Units **Quality or Concentration** Units of Ex. Type Analysis Sample **Biosolids Quantity** 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 (Mo Total) Requirement Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER
MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED
PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED BASED ON MY INQUIRY
OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR
GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND
BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR
SUBMITTION FOR SET IN THE PROPAMATION, INCLUDING THE POSSIBLE TRY OF ENDEADING FOR PENALTIES FOR NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning

SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

Permit Number: Monitoring Period FLA014340-006-DW3P

04/01/2024 To: 04/30/2024

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 2.1 | | 0.012 | | | | 7.5 | |
| 2 | | 3 | 2.4 | | 0.007 | | | | 7.5 | |
| 3 | 269 | 3.5 | 3.0 | <1 | 0.018 | 0.42 | 250 | 2.8 | 7.4 | |
| 4 | | | 3.1 | | 0.003 | | | | 7.4 | |
| 5 | | | 2.8 | | 0.013 | | | | 7.4 | |
| 6 | | | 2.3 | | 0.013 | | | | 7.4 | |
| 7 | | | | | 0.013 | | | | | |
| 8 | | | 2.4 | | 0.005 | | | | 7.4 | |
| 9 | | | 2.6 | | 0.011 | | | | 7.5 | |
| 10 | | | 3.0 | | 0.010 | | | | 7.5 | |
| 11 | | | 3.1 | | 0.014 | | | | 7.5 | |
| 12 | | | 2.4 | | 0.013 | | | | 7.6 | |
| 13 | | | 1.8 | | 0.004 | | | | 7.6 | |
| 14 | | | | | 0.004 | | | | | |
| 15 | | | 2.5 | | 0.009 | | | | 7.3 | |
| 16 | | | 3.1 | | 0.008 | | | | 7.6 | |
| 17 | | | 3.0 | | 0.008 | | | | 7.5 | |
| 18 | | | 3.1 | | 0.008 | | | | 7.5 | |
| 19 | | | 3.2 | | 0.009 | | | | 7.5 | |
| 20 | | | 3.7 | | 0.008 | | | | 7.5 | |
| 21 | | | | | 0.008 | | | | | |
| 22 | | | 3.1 | | 0.008 | | | | 7.6 | |
| 23 | | | 3.0 | | 0.008 | | | | 7.6 | |
| 24 | | | 3.1 | | 0.008 | | | | 7.6 | |
| 25 | | | 3.0 | | 0.006 | | | | 7.5 | |
| 26 | | | 3.1 | | 0.006 | | | | 7.5 | |
| 27 | | | 3.1 | | 0.008 | | | | 7.6 | |
| 28 | | | | | 0.008 | | | | | |
| 29 | | | 3.0 | | 0.005 | | | | 7.5 | |
| 30 | | | 3.2 | | 0.006 | | | | 7.5 | |
| 31 | | | | | | | | | | |
| Total | 269 | 3.5 | | <1 | 0.261 | 0.42 | 250 | 2.8 | | |
| Mo. Avg. | 269 | 3.5 | | <1 | 0.009 | 0.42 | 250 | 2.8 | | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|---|-----------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

LOCATION: 1525 US Highway 27 S

Lake Placid, FL 33852

COUNTY: HIGHLANDS

FACILITY:

PERMIT NUMBER: FLA014340

LIMIT:

FINAL REPORT: DW GROUP: FACILITY TYPE:

MONITORING GROUP: R-001

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

Monthly

Domestic

MONITORING PERIOD: From: 05/01/2024 To: 05/31/2024

| Parameter | | Quantity o | or Loading | Units | Qualit | ty or Concent | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8.7 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 6.9 | 6.9 | 6.9 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 5 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | - | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 6 | 6 | 6 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity (| or Loading | Units | Qualit | ty or Concent | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|-------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Anni Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| pH | Sample Measurement | | | | 7.1 | | 7.4 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 5.3 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|--|--|---|--|--|--|---------------|-------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.005 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 19 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 149 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 116 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN. MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND ERSONS WHO MA RMATION, THE D ATE AND COMP | CORDANCE WIT DEVALUATED TO NAGE THE SYST NFORMATION ST LETE. I AM AW | TH A SYSTEM DI HE INFORMATION EM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS N SUBMITTED, I PERSONS DIREC O THE BEST OF RE ARE SIGNIF | SURE THAT QUA BASED ON MY IN TLY RESPONSIB MY KNOWLEDG ICANT PENALTI | ALIFIED OR AUTH NQUIRY LE FOR Electronic GE AND ES FOR | IORIZED AGENT | AL EXECUTIV | | E SUBMITTED ON 92 12/02/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 DW GROUP: Domestic FACILITY TYPE: MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 05/01/2024 To: 05/31/2024 Frequency No. Sample Parameter Quantity or Loading Units **Quality or Concentration** Units of Ex. Type Analysis Biosolids Quantity Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PRESONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED BASED ON MY INQUIRY OF THE PERSON WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT SUBMITTED ON

GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

(727) 848-8292 12/02/2024

Tonya Luning

Permit Number: Monitoring Period FLA014340-006-DW3P

From:

05/01/2024 To: 05/31/2024

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 3.1 | | 0.008 | | | | 7.3 | |
| 2 | | | 3.2 | | 0.002 | | | | 7.4 | |
| 3 | | | 3.0 | | 0.006 | | | | 7.4 | |
| 4 | | | 3.2 | | 0.007 | | | | 7.4 | |
| 5 | | | | | 0.007 | | | | | |
| 6 | | | 1.5 | | 0.005 | | | | 7.3 | |
| 7 | 149 | 6.9 | 3.3 | <1 | 0.007 | 5.3 | 116 | 6 | 7.2 | |
| 8 | | | 3.1 | | 0.003 | | | | 7.2 | |
| 9 | | | 3.0 | | 0.006 | | | | 7.2 | |
| 10 | | | 3.1 | | 0.008 | | | | 7.3 | |
| 11 | | | 1.8 | | 0.003 | | | | 7.3 | |
| 12 | | | | | 0.003 | | | | | |
| 13 | | | 1.6 | | 0.008 | | | | 7.3 | |
| 14 | | | 1.8 | | 0.006 | | | | 7.3 | |
| 15 | | | 1.6 | | 0.002 | | | | 7.3 | |
| 16 | | | 1.4 | | 0.005 | | | | 7.3 | |
| 17 | | | 1.4 | | 0.004 | | | | 7.2 | |
| 18 | | | 1.2 | | 0.006 | | | | 7.2 | |
| 19 | | | | | 0.006 | | | | | |
| 20 | | | 1.1 | | 0.006 | | | | 7.3 | |
| 21 | | | 1.0 | | 0.002 | | | | 7.2 | |
| 22 | | | 1.3 | | 0.004 | | | | 7.2 | |
| 23 | | | 1.2 | | 0.003 | | | | 7.3 | |
| 24 | | | 1.2 | | 0.005 | | | | 7.3 | |
| 25 | | | 1.1 | | 0.006 | | | | 7.3 | |
| 26 | | | | | 0.006 | | | | | |
| 27 | | | 1.2 | | 0.006 | | | | 7.3 | |
| 28 | | | 1.1 | | 0.006 | | | | 7.2 | |
| 29 | | | 1.3 | | 0.006 | | | | 7.2 | |
| 30 | | | 1.3 | | 0.003 | | | | 7.2 | |
| 31 | | | 1.4 | | 0.003 | | | | 7.1 | |
| Total | 149 | 6.9 | | <1 | 0.158 | 5.3 | 116 | 6 | | |
| Mo. Avg. | 149 | 6.9 | | <1 | 0.005 | 5.3 | 116 | 6 | | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|---|-----------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

1525 US Highway 27 S LOCATION:

Lake Placid, FL 33852

COUNTY:

FACILITY:

HIGHLANDS

PERMIT NUMBER: FLA014340

LIMIT: FINAL REPORT:

FACILITY TYPE: DW

MONITORING GROUP: R-001

GROUP:

Domestic

Monthly

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

MONITORING PERIOD: From: 06/01/2024 To: 06/30/2024

| | | | | | | | MONT | ORTHO I LICIN | JD. TIOIII | . 00/01/2024 10: 00/3 | 7072024 |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|---------------|------------|-----------------------------|----------------|
| Parameter | | Quantity o | or Loading | Units | Qualit | ty or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8.2 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 3 | 3 | 3 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 4.8 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 2 | 2 | 2 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity or Loading Units Quality or Concentration | | | | Units | No. Ex. | Frequency of Analysis | Sample Type | | |
|---|-----------------------|--|--|--|------------------|---------------------|--------------------|-----------------------------|----------------|---------------|--------|
| Coliform, Fecal | Sample Measurement | | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | *** | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 7 | | 7.2 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1.1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 0.49 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | or Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|---|--|---|--|--|---|--------------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.005 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 13 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 404 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 420 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PENAMY DIRECTION OR SUPERSONNEL PROPERLY OF THE PERSON OR PEGATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND RSONS WHO MA RMATION, THE I ATE AND COMP | CCORDANCE WIT DEVALUATED TH NAGE THE SYST NEORMATION SU LETE. I AM AWA | H A SYSTEM DI HE INFORMATIO EM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS N SUBMITTED. I PERSONS DIREC D THE BEST OF RE ARE SIGNIF | SURE THAT QUA BASED ON MY IN TLY RESPONSIB MY KNOWLEDG ICANT PENALTI | ALIFIED OR AUTH NOUIRY LE FOR Electronics GE AND ES FOR | ORIZED AGENT | L EXECUTIV | TELEPHON (727) 848-82 | SUBMITTED ON 92 07/23/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DWGROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork 1525 US Highway 27 S LOCATION: DESCRIPTION: **Biosolids Quantity** Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 06/01/2024 To: 06/30/2024 Frequency No. Sample Parameter Quantity or Loading Quality or Concentration Units Units of Ex. Type Analysis **Biosolids Quantity** Sample 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 Calculated 1 Monthly Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 Requirement (Mo Total) I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER
MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED
PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY
OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR
GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND
BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR
SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

Tonya Luning

Permit Number: Monitoring Period

FLA014340-006-DW3P

06/01/2024 To: 06/30/2024 From:

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|---|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | - | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 2.1 | | 0.006 | | | | 7.2 | |
| 2 | | | 2.1 | | 0.007 | | | | 7.2 | |
| 3 | | | 1.6 | | 0.007 | | | | 7.1 | |
| 4 | 404 | 3 | 1.4 | <1 | 0.005 | 0.49 | 420 | 2 | 7.1 | |
| 5 | | | 1.2 | | 0.003 | | 720 | | 7.2 | |
| 6 | | | 1.1 | | 0.002 | | | | 7.1 | |
| 7 | | | 1.2 | | 0.003 | | | | 7.2 | |
| 8 | | | 1.1 | | 0.006 | | | | 7.1 | |
| 9 | | | 1.1 | | 0.006 | | | | 7.1 | |
| 10 | | | 1.4 | | 0.008 | | | | 7.0 | |
| 11 | | | 1.4 | | 0.008 | | | | 7.0 | |
| 12 | | | 1.1 | | 0.002 | | | | 7.2 | |
| 13 | | | 1.3 | | 0.002 | | | | 7.2 | |
| 14 | | | 1.3 | | 0.002 | | | | 7.1 | |
| 15 | | | 1.2 | | 0.005 | | | | 7.2 | |
| 16 | | | 1.2 | | 0.006 | | | | 1.2 | |
| 17 | | | 1.4 | | 0.004 | | | | 7.2 | _ |
| 18 | | | 1.3 | | 0.004 | | | | 7.2 | |
| 19 | | | 1.3 | - | 0.003 | | | | 7.1 | |
| 20 | | | 1.1 | | 0.005 | | | | 7.1 | |
| 21 | | | 1.2 | | 0.003 | | | | 7.0 | |
| 22 | | | 1.2 | | 0.007 | | | | 7.1 | |
| 23 | | | 1.2 | | 0.007 | | | | 1.1 | |
| 24 | | | 1.3 | | 0.007 | | | | 7.1 | |
| 25 | | | 1.2 | | 0.005 | | | | 7.2 | |
| 26 | | | 1.1 | | 0.003 | | | | 7.1 | |
| 27 | | | 1.2 | | 0.003 | | | | 7.1 | |
| 28 | | | 1.2 | | 0.003 | | | | 7.1 | |
| 29 | | | 1.3 | | 0.008 | | | | 7.1 | |
| 30 | | | 1.3 | | 0.004 | | | | 1.1 | |
| 31 | | | | | 0.004 | | | | | |
| | 404 | 3 | | <1 | 0.151 | 0.49 | 420 | 2 | | |
| Total | | 3 | | <1 | 0.151 | 0.49 | 420 | 2 | | |
| Mo. Avg. | 404 | 3 | | <u> </u> | 0.005 | 0.43 | 420 | | | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 28119 | Name: | Christopher Berish |
|---------------------------------------|--------|---|-----------------|-------|-------|--------------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

4939 Cross Bayou Boulevard

New Port Richey, FL 34652

PERMIT NUMBER: FLA014340

LIMIT:

FINAL REPORT:

Monthly GROUP: Domestic

DW FACILITY TYPE:

MONITORING GROUP: R-001

FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

LOCATION: 1525 US Highway 27 S

Lake Placid, FL 33852

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

COUNTY: HIGHLANDS

ADDRESS:

MONITORING PERIOD: From: 07/01/2024 To: 07/31/2024

| | | | | | | | WONT | Olding I Lidi | D. HOM | . 07/01/2024 10. 07/3 | 1/2024 |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|---------------|-----------------------------|-----------------------|--------|
| Parameter | | Quantity o | or Loading | Units | Qualit | tration | Units | No. Ex. | Frequency of Analysis | Sample Type | |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 8.5 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 6.3 | 6.3 | 6.3 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 5.1 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 5.4 | 5.4 | 5.4 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity or Loading Units Quality or Concentration | | | | Units | No. Ex. | Frequency of Analysis | Sample Type | | |
|---|-----------------------|--|--|--|------------------|---------------------|--------------------|-----------------------------|----------------|---------------|--------|
| Coliform, Fecal | Sample Measurement | | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| pH | Sample Measurement | | | | 6.8 | | 7.1 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 3.7 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity | or Loading | Units | Quali | ty or Concen | itration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|----------|------------------|-------|-------|--------------|---------------------|---------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.006 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 11 | _ | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 141 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 128 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L . | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT OR | | | | | | | | | | |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 DW GROUP: Domestic FACILITY TYPE: MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: **Biosolids Quantity** Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 07/01/2024 To: 07/31/2024 Frequency No. Sample **Parameter** Quantity or Loading Units **Quality** or Concentration Units Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 Calculated 1 Monthly Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon, Site: RMP-2 Requirement (Mo Total) I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT SUBMITTED ON Tonya Luning OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 08/26/2024 GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR

SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

Permit Number: Monitoring Period FLA014340-006-DW3P

From: 07/01/2024 To: 07/31/2024

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 |
| 1 | 141 | 6.3 | 1.3 | | 0.008 | 3.7 | 128 | 5.4 | 7.0 |
| 2 | | | 1.2 | | 0.005 | | | | 7.0 |
| 3 | | | 1.4 | | 0.006 | | | | 7.1 |
| 4 | | | 1.2 | | 0.011 | | | | 7.0 |
| 5 | | | 1.1 | | 0.004 | | | | 7.0 |
| 6 | | | 1.3 | | 0.007 | | | | 7.1 |
| 7 | | | | | 0.007 | | | | |
| 8 | | | 1.1 | <1 | 0.004 | | | | 7.0 |
| 9 | | | 1.2 | | 0.004 | | | | 7.0 |
| 10 | | | 1.1 | | 0.002 | | | | 7.1 |
| 11 | | | 2.6 | | 0.006 | | | | 7.0 |
| 12 | | | 1.7 | | 0.004 | | | | 7.0 |
| 13 | | | 1.4 | | 0.005 | | | | 7.0 |
| 14 | | | | | 0.005 | | | | |
| 15 | | | 1.2 | | 0.007 | | | | 7.1 |
| 16 | | | 1.2 | | 0.007 | | | | 7.0 |
| 17 | | | 1.1 | | 0.008 | | | | 7.0 |
| 18 | | | 1.2 | | 0.008 | | | | 7.0 |
| 19 | | | 1.2 | | 0.005 | | | | 7.0 |
| 20 | | | 1.1 | | 0.008 | | | | 7.0 |
| 21 | | | | | 0.008 | | | | |
| 22 | | | 1.2 | | 0.007 | | | | 7.1 |
| 23 | | | 1.1 | | 0.006 | | | | 7.0 |
| 24 | | | 1.1 | | 0.006 | | | | 7.0 |
| 25 | | | 1.0 | | 0.005 | | | | 6.9 |
| 26 | | | 1.3 | | 0.007 | | | | 6.8 |
| 27 | | | 1.1 | | 0.009 | | | | 6.9 |
| 28 | | | | | 0.009 | | | | |
| 29 | | | 1.2 | | 0.004 | | | | 6.8 |
| 30 | | | 1.0 | | 0.010 | | | | 6.8 |
| 31 | | | 1.1 | | 0.003 | | | | 6.8 |
| Total | 141 | 6.3 | | <1 | 0.195 | 3.7 | 128 | 5.4 | |
| Mo. Avg. | 141 | 6.3 | | <1 | 0.006 | 3.7 | 128 | 5.4 | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 29884 | Name: | Vincent Cantero |
|---------------------------------------|--------|---|-----------------|-------|-------|-----------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

FACILITY: LOCATION: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork 1525 US Highway 27 S

Lake Placid, FL 33852

PERMIT NUMBER: FLA014340

LIMIT:

FINAL REPORT:

Monthly GROUP: Domestic

DW FACILITY TYPE:

MONITORING GROUP: R-001

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

COUNTY:

HIGHLANDS

MONITORING PERIOD: From: 08/01/2024 To: 08/31/2024

| | | | | | | | MONII | OKING PEKI | DD: From | : 08/01/2024 To: 08/3 | 1/2024 |
|--|-----------------------|------------|---|--|-------------------|--------------------|------------------|------------|------------|-----------------------------|----------------|
| Parameter | | Quantity (| Quantity or Loading Units Quality or Concentr | | | | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 6 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 4.8 | 4.8 | 4.8 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 5.4 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 4.4 | 4.4 | 4.4 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity (| or Loading | g Units Quality or Concentration | | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|------------|----------------------------------|------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 6.6 | | 7 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 14 | | 1 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Quali | ty or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|--|------------|------------------|-------|-------|--------------|---------------------|---------|------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.005 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 11 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | - | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 105 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 104 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNIDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed (727) 848-8292 (727) 848-8292 (727) 848-8292 (727) 848-8292 (727) 848-8292 (727) 848-8292 (728) 848-8292 (728) 848-8292 (729) 848-829 | | | | | | | | | | |

| Parameter | Monitoring Site | Comments for Monitoring Group - R-001 |
|-----------|-----------------|--|
| 00620 A | EFA-01 | The operator utilizes field nitrate strips to measure effluent nitrate levels and make aeration adjustments where available in an attempt to maintain effluent within permitted limits. limit The operator will reduce aeration blower run times due to lower flow conditions currently being received at the plant. We will continue to monitor and report as required. |
| | | |
| | | |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 DW GROUP: Domestic FACILITY TYPE: MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 08/01/2024 To: 08/31/2024 Frequency No. Sample Parameter Quantity or Loading Units **Ouality** or Concentration Units Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report (Calculated) dry tons (1 Monthly) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 Calculated 1 Monthly Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 Requirement (Mo Total) NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE SUBMITTED ON OR AUTHORIZED AGENT MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed Tonya Luning (727) 848-8292 10/01/2024 GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND

BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

Permit Number: Monitoring Period FLA014340-006-DW3P

From: 08/01/2024 To: 08/31/2024

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 1.1 | | 0.006 | | | | 6.9 | |
| 2 | | | 1.0 | | 0.007 | | | | 6.8 | |
| 3 | | | 1.2 | | 0.008 | | | | 6.8 | |
| 4 | | | | | 0.008 | | | | | |
| 5 | | | 1.0 | | 0.002 | | | | 6.8 | |
| 6 | | | 1.2 | | 0.004 | | | | 6.8 | |
| 7 | | | 1.3 | | 0.006 | | | | 6.8 | |
| 8 | | | 1.2 | | 0.002 | | | | 6.8 | |
| 9 | | | 1.0 | | 0.005 | | | | 6.9 | |
| 10 | | | 1.3 | | 0.006 | | | | 6.9 | |
| 11 | | | | | 0.006 | | | | | |
| 12 | | | 1.2 | | 0.007 | | | | 6.8 | |
| 13 | | | 1.1 | | 0.006 | | | | 6.8 | |
| 14 | | | 1.0 | | 0.003 | | | | 6.7 | |
| 15 | | | 1.2 | | 0.005 | | | | 6.7 | |
| 16 | | | 1.0 | | 0.004 | | | | 6.8 | |
| 17 | | | 1.1 | | 0.006 | | | | 6.7 | |
| 18 | | | | | 0.006 | | | | | |
| 19 | | | 1.0 | | 0.007 | | | | 6.7 | |
| 20 | | | 1.1 | | 0.002 | | | | 6.7 | |
| 21 | | | 1.0 | | 0.004 | | | | 6.7 | |
| 22 | | | 1.0 | | 0.004 | | | | 6.6 | |
| 23 | | | 1.3 | | 0.006 | | | | 6.9 | |
| 24 | | | 1.1 | | 0.003 | | | | 6.8 | |
| 25 | | | | | 0.005 | | | | | |
| 26 | | | 1.0 | | 0.006 | | | | 6.7 | |
| 27 | 105 | 4.8 | 1.3 | <1 | 0.004 | 14 | 104 | 4.4 | 6.7 | |
| 28 | | | 1.4 | | 0.005 | | | | 6.8 | |
| 29 | | | 1.5 | | 0.004 | | | | 6.7 | |
| 30 | | | 1.6 | | 0.008 | | | | 6.9 | |
| 31 | | | 1.5 | | 0.006 | | | | 7.0 | |
| Total | | | | | 0.161 | | | | | |
| Mo. Avg. | | | | | 0.005 | | | | | |

| PLANT STAFFING: Day Shift Operator | Class: | С | Certificate No: | 29884 | Name: | Vincent Cantero |
|---------------------------------------|--------|---|-----------------|-------|-------|-----------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

LIMIT:

FLA014340

FINAL REPORT:

Monthly GROUP:

DW FACILITY TYPE: MONITORING GROUP: R-001

Domestic

FACILITY:

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

LOCATION:

1525 US Highway 27 S

Lake Placid, FL 33852

DESCRIPTION:

PERMIT NUMBER:

Land application system consisting of two rapid infiltration basins.

COUNTY:

HIGHLANDS

MONITORING PERIOD: From: 09/01/2024 To: 09/30/2024

| Parameter | | Quantity o | r Loading | Units | Qualic | y or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|-----------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 6.5 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 11 | 11 | 11 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 6.1 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 13 | 13 | 13 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity o | r Loading | Units | Quality or Concentration | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|------------|-----------|-------|--------------------------|---------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Annl Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 6.6 | | 6.8 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | nig/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 23 | | 1 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity of | or Loading | Units | Qualit | y or Concen | tration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|--|--|--|---|--|---|--|---------------|-------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.007 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 12 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 90 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 90 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PENAMY DIRECTION OR SUPPERSONNEL PROPERLY OF THE PERSON OR PEGATHERING THE INFO: BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN AC GATHERED AND ERSONS WHO MA RMATION, THE I ATE AND COMP | CORDANCE WIT DEVALUATED TO NAGE THE SYST NEORMATION ST LETE. I AM AW | TH A SYSTEM DI HE INFORMATIO TEM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS: N SUBMITTED, E PERSONS DIREC O THE BEST OF RE ARE SIGNIFI | SURE THAT QUA BASED ON MY IT TLY RESPONSIB MY KNOWLEDO CANT PENALTI | ALIFIED OR AUTH VQUIRY LE FOR Electronic SE AND ES FOR | IORIZED AGENT | AL EXECUTIV | | SUBMITTED ON 92 10/23/2024 |

| Parameter | Monitoring Site | Comments for Monitoring Group - R-001 |
|-----------|-----------------|---|
| 00620 A | | The operator utilizes field nitrate strips to measure effluent nitrate levels and make aeration adjustments where available in an attempt to maintain effluent within permitted limits. The operator will reduce aeration blower run times due to lower flow conditions currently being received at the plant. We will continue to monitor and report as required. |
| | | |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: Biosolids Quantity Lake Placid, FL 33852 HIGHLANDS COUNTY: MONITORING PERIOD: From: 09/01/2024 To: 09/30/2024 Frequency No. Sample **Parameter** Quantity or Loading Units **Quality or Concentration** Units of Ex. Type Analysis Biosolids Quantity Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report (Calculated) dry tons (1 Monthly) Mon. Site: RMP-1 (Mo Total) Requirement Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER
MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED
PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY
OF THE PERSON WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR
GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND
BELIEF, TRUE. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR
SUBMITTED FOR MY SUBMITTED IS FOR SUBMITTED IN SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND
BELIEF, TRUE. ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT SUBMITTED ON (727) 848-8292 10/23/2024 Tonya Luning

SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING

Permit Number: Monitoring Period FLA014340-006-DW3P

From:

09/01/2024 To: 09/30/2024

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | | | 0.006 | | | | | |
| 2 | | | 1.4 | | 0.007 | | | | 6.8 | |
| 3 | | | 1.5 | | 0.008 | | | | 6.7 | |
| 4 | | | 1.6 | | 0.009 | | | | 6.8 | |
| 5 | | | 1.4 | | 0.005 | | | | 6.7 | |
| 6 | | | 1.2 | | 0.007 | | | | 6.7 | |
| 7 | | | 1.4 | | 0.013 | | | | 6.7 | |
| 8 | | | | | 0.013 | | | | | |
| 9 | | | 1.2 | | 0.009 | | | | 6.7 | |
| 10 | | | 1.1 | | 0.008 | | | | 6.7 | |
| 11 | 90 | 11 | 1.2 | <1 | 0.009 | 23 | 92 | 13 | 6.7 | |
| 12 | | | 1.1 | | 0.009 | | | | 6.7 | |
| 13 | | | 1.0 | | 0.006 | | | | 6.7 | |
| 14 | | | 1.1 | | 0.009 | | | | 6.7 | |
| 15 | | | | | 0.009 | | | | | |
| 16 | | | 2.1 | | 0.006 | | | | 6.8 | |
| 17 | | | 2.0 | | 0.007 | | | | 6.7 | |
| 18 | | | 2.0 | | 0.006 | | | | 6.7 | |
| 19 | | | 1.8 | | 0.003 | | | | 6.7 | |
| 20 | | | 1.6 | | 0.008 | | | | 6.7 | |
| 21 | | | 1.4 | | 0.008 | | | | 6.6 | |
| 22 | | | | | 0.008 | | | | | |
| 23 | | | 1.4 | | 0.005 | | | | 6.7 | |
| 24 | | | 1.4 | | 0.003 | | | | 6.7 | |
| 25 | | | 1.2 | | 0.005 | | | | 6.7 | |
| 26 | | | 1.1 | | 0.009 | | | | 6.7 | |
| 27 | | | 1.0 | | 0.003 | | | | 6.7 | |
| 28 | | | 1.0 | | 0.006 | | | | 6.7 | |
| 29 | | | | | 0.006 | | | | | |
| 30 | | | 1.1 | | 0.007 | | | | 6.7 | |
| 31 | | | | | | | | | | |
| Total | | | | | 0.217 | | | | | |
| Mo. Avg. | | | | | 0.007 | | | | | |

| PLANT STAFFING: Day Shift Operator | Class: | С | _ Certificate No: | 29884 | Name: | Vincent Cantero | |
|---------------------------------------|--------|---|-------------------|-------|-------|-----------------|--|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | | |
| Lead Operator | Class: | | Certificate No: | | Name: | | |

PERMITTEE NAME: LP WATERWORKS, INC.

ADDRESS: 4939 Cross Bayou Boulevard

New Port Richey, FL 34652

Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork

1525 US Highway 27 S LOCATION:

Lake Placid, FL 33852

COUNTY: HIGHLANDS

FACILITY:

PERMIT NUMBER: FLA014340

LIMIT: FINAL REPORT:

DW GROUP: Domestic FACILITY TYPE:

MONITORING GROUP: R-001

DESCRIPTION:

Land application system consisting of two rapid infiltration basins.

Monthly

MONITORING PERIOD: From: 10/01/2024 To: 10/31/2024

| Parameter | | Quantity o | or Loading | Units | Qualit | ty or Concent | ration | Units | No. Ex. | Frequency of Analysis | Sample Type |
|--|-----------------------|------------|------------|-------|-------------------|--------------------|------------------|-------|------------|-----------------------------|----------------|
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | 7.1 | | | 0 | 1 Monthly | Grab |
| PARM Code 80082 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | 9.3 | 9.3 | 9.3 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | 6.8 | | | 0 | 1 Monthly | Grab |
| PARM Code 00530 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 20.0 (Annl Avg) | | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | 9.6 | 9.6 | 9.6 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 A Mon. Site: EFA-01 | Permit Requirement | | | | 60.0 (Maximum) | 45.0 (Wkly Avg) | 30.0 (Mo Avg) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity | or Loading | Units | Qualit | Quality or Concentration | | | No. Ex. | Frequency of Analysis | Sample Type |
|---|-----------------------|----------|------------|-------|------------------|--------------------------|--------------------|---------|------------|-----------------------------|----------------|
| Coliform, Fecal | Sample Measurement | _ | | | | <1 | | | 0 | 1 Monthly | Grab |
| PARM Code 74055 Y Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Anni Avg) | | #/100mL | | (1 Monthly) | (Grab) |
| Coliform, Fecal | Sample Measurement | | | | | <1 | <1 | | 0 | 1 Monthly | Grab |
| PARM Code 74055 A Mon. Site: EFA-01 | Permit Requirement | | | | | 200.0 (Mo Geomn) | 800.0 (Maximum) | #/100mL | | (1 Monthly) | (Grab) |
| рН | Sample Measurement | | | | 6.6 | | 7.2 | | 0 | 5 Days/Week | Grab |
| PARM Code 00400 A Mon. Site: EFA-01 | Permit Requirement | | | | 6.0 (Minimum) | | 8.5 (Maximum) | s.u. | | (5 Days/Week) | (Grab) |
| Chlorine, Total Residual | Sample Measurement | | | | 1 | | | | 0 | 5 Days/Week | Grab |
| PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-01 | Permit Requirement | | | | 0.5 (Minimum) | | | mg/L | | (5 Days/Week) | (Grab) |
| Nitrogen, Nitrate, Total (as N) | Sample Measurement | | | | | | 6.8 | | 0 | 1 Monthly | Grab |
| PARM Code 00620 A Mon. Site: EFA-01 | Permit Requirement | | | | | | 12.0 (Maximum) | mg/L | | (1 Monthly) | (Grab) |

| Parameter | | Quantity of | or Loading | Units | Quality or Concentration | | | Units | No. Ex. | Frequency of Analysis | Sample Type |
|---|---|---|--|---|--|---|---|---------------|-------------|-----------------------------|---|
| Flow | Sample Measurement | | 0.007 | | | | | | 0 | 5 Days/Week | Elapsed Time Measurement on Pump (Pump Log) |
| PARM Code 50050 1 Mon. Site: FLW-01 | Permit Requirement | | 0.05 (Mo Avg) | MGD | | | | | | (5 Days/Week) | (Elapsed Time Measurement on Pump (Pump Log)) |
| Percent Capacity, (TMADF /Permitted Capacity) x 100 | Sample Measurement | | | | | | 13 | | 0 | 1 Monthly | Calculated |
| PARM Code 00180 P Mon. Site: CAL-01 | Permit Requirement | | | | | | Report (Mo Avg) | percent | | (1 Monthly) | (Calculated) |
| BOD, Carbonaceous 5 day, 20C | Sample Measurement | | | | | | 105 | | 0 | 1 Monthly | Grab |
| PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| Solids, Total Suspended | Sample Measurement | | | | | | 86 | | 0 | 1 Monthly | Grab |
| PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01 | Permit Requirement | | | | | | Report (Maximum) | mg/L | | (1 Monthly) | (Grab) |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Tonya Luning | I CERTIFY UNDER PEN, MY DIRECTION OR SU PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFO BELIEF, TRUE, ACCUR SUBMITTING FALSE IN VIOLATIONS. | PERVISION IN ACT GATHERED AND ERSONS WHO MARKET THE BATE AND COMP | CCORDANCE WIT D EVALUATED TI ANAGE THE SYST INFORMATION SU PLETE, I AM AW. | H A SYSTEM DI HE INFORMATIO EM, OR THOSE I JBMITTED IS, TO ARE THAT THE | ESIGNED TO AS N SUBMITTED. I PERSONS DIREC O THE BEST OF RE ARE SIGNIF | SURE THAT QUA BASED ON MY IN TLY RESPONSIB MY KNOWLEDO ICANT PENALTII | ALIFIED OR AUTH QUIRY LE FOR Electronic EE AND ES FOR | IORIZED AGENT | AL EXECUTIV | | SUBMITTED ON 92 11/13/2024 |

PERMITTEE NAME: LP WATERWORKS, INC. PERMIT NUMBER: FLA014340 ADDRESS: 4939 Cross Bayou Boulevard LIMIT: FINAL REPORT: Monthly New Port Richey, FL 34652 FACILITY TYPE: DW GROUP: Domestic MONITORING GROUP: RMP-Q FACILITY: Lake Placid Camp Florida Resort WWTP AKA Woodlands Waterwork LOCATION: 1525 US Highway 27 S DESCRIPTION: **Biosolids Quantity** Lake Placid, FL 33852 COUNTY: HIGHLANDS MONITORING PERIOD: From: 10/01/2024 To: 10/31/2024 Frequency No. Sample Parameter Quantity or Loading Units **Quality or Concentration** Units of Ex. Type Analysis **Biosolids Quantity** Sample 0 0 1 Monthly Calculated (Transferred) Measurement PARM Code B0007 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-1 Requirement (Mo Total) Sample Biosolids Quantity (Landfilled) 0 0 1 Monthly Calculated Measurement PARM Code B0008 + Permit Report dry tons (1 Monthly) (Calculated) Mon. Site: RMP-2 (Mo Total) Requirement NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER TELEPHONE SUBMITTED ON MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED OR AUTHORIZED AGENT PERSONNEL PROPERLY GATHERED AND EVALUATED THE INFORMATION SUBMITTED. BASED ON MY INQUIRY Tonya Luning (727) 848-8292 11/13/2024 OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR Electronically Signed GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

Permit Number: Monitoring Period FLA014340-006-DW3P

From:

10/01/2024 To: 10/31/2024

Facility:

| | BOD, Carbonaceous 5 day, 20C (Influent) mg/L L | BOD, Carbonaceous 5 day, 20C mg/L L | Chlorine, Total Residual (For Disinfection) mg/L | Coliform, Fecal #/100mL | Flow MGD | Nitrogen, Nitrate, Total (as N) mg/L L | Solids, Total Suspended (Influent) mg/L | Solids, Total Suspended mg/L | pH s.u. | |
|-----------|--|--|---|-------------------------------|-------------|---|--|------------------------------------|------------|--|
| Code | 80082 | 80082 | 50060 | 74055 | 50050 | 00620 | 00530 | 00530 | 00400 | |
| Mon. Site | INF-01 | EFA-01 | EFA-01 | EFA-01 | FLA-01 | EFA-01 | INF-01 | EFA-01 | EFA-01 | |
| 1 | | | 1.0 | | 0.007 | | | | 6.6 | |
| 2 | | | 1.7 | | 0.004 | | | | 6.7 | |
| 3 | | | 1.2 | | 0.006 | | | | 6.6 | |
| 4 | | | 1.0 | | 0.007 | | | | 6.7 | |
| 5 | | | 1.3 | | 0.005 | | | | 6.7 | |
| 6 | | | | | 0.005 | | | | | |
| 7 | | | 1.2 | | 0.008 | | | | 7.0 | |
| 8 | | | 1.4 | | 0.009 | | | | 7.0 | |
| 9 | | | 1.3 | | Hurrican | | | | 7.0 | |
| 10 | | | 1.0 | | Milton | | | | 7.0 | |
| 11 | | | 1.2 | | 0.016 | | | | 7.1 | |
| 12 | | | 1.4 | | 0.007 | | | | 7.2 | |
| 13 | | | | | 0.007 | | - | | | |
| 14 | 105 | 9.3 | 1.4 | <1 | 0.009 | 6.8 | 86 | 9.6 | 7.1 | |
| 15 | | | 1.5 | | 0.007 | | | | 7.0 | |
| 16 | | | 1.3 | | 0.005 | | | | 6.9 | |
| 17 | | | 1.1 | | 0.007 | | | | 7.1 | |
| 18 | | | 1.4 | | 0.006 | | | | 7.1 | |
| 19 | | | 1.6 | | 0.008 | | | | 7.1 | |
| 20 | | | | | 0.008 | | | | | |
| 21 | | | 1.8 | | 0.004 | | | | 7.1 | |
| 22 | | | 1.4 | | 0.005 | | | | 7.0 | |
| 23 | | | 1.5 | | 0.004 | | | | 6.9 | |
| 24 | | | 1.3 | | 0.006 | | | | 6.8 | |
| 25 | | | 1.2 | | 0.006 | | | | 6.8 | |
| 26 | | | 1.5 | | 0.005 | | | | 7.1 | |
| 27 | | | | | 0.005 | | | | | |
| 28 | | | 1.2 | | 0.008 | | | | 7.0 | |
| 29 | | | 1.7 | | 0.008 | | | | 6.8 | |
| 30 | | | 1.5 | | 0.006 | | | | 6.9 | |
| 31 | | | 1.4 | | 0.003 | | | | 6.9 | |
| Total | 105 | 9.3 | | <1 | 0.191 | 6.8 | 86 | 9.6 | | |
| Mo. Avg. | 105 | 9.3 | | <1 | 0.007 | 6.8 | 86 | 9.6 | | |

| PLANT STAFFING: Day Shift Operator | Class: | _C | Certificate No: | 29884 | Name: | Vincent Cantero |
|---------------------------------------|--------|----|-----------------|-------|-------|-----------------|
| Evening Shift Operator | Class: | | Certificate No: | | Name: | |
| Night Shift Operator | Class: | | Certificate No: | | Name: | |
| Lead Operator | Class: | | Certificate No: | | Name: | |

LP Waterworks, Inc. Second Data Request FDR 14

| | WTP-1 | WTP-2 |
|------------|--------|--------|
| Hydrotanks | 11,000 | 14,000 |

Well Capacity

| WMD Permit - Combined | 95,900 combined |
|---------------------------|------------------|
| DEP permit - Plant Design | 200,000 combined |

| Year Drilled | 1990 | 1990 |
|-------------------|------|------|
| Depth | 1780 | 830 |
| Pump Capacity gpm | 280 | 300 |
| Motor HP | 25 | 50 |
| Hydrants | 7 | |

Wastewater

Gravity Lines:

| 4" | 616 |
|------------|-------|
| 6" | 3531 |
| 8" | 2720 |
| 10" | 1599 |
| 12" | 83 |
| Force Main | 11827 |
| Manholes | 45 |

| | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | Aug-24 | Sep-24 | Oct-24 |
|------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| General Service | | | | | | | | | | | | |
| Water Gallons | 80 | 132 | 130 | 172 | 120 | 103 | 74 | 30 | 48 | 30 | 23 | 15 |
| Sewer Gallons | 79 | 28 | 45 | 64 | 55 | 40 | 29 | 11 | 26 | 8 | 7 | 6 |
| | | | | | | | | | | | | |
| Residential | | | | | | | | | | | | |
| Water Gallons | 377 | 412 | 528 | 538 | 629 | 626 | 484 | 343 | 256 | 192 | 199 | 131 |
| Sewer Gallons | 328 | 377 | 474 | 506 | 579 | 560 | 426 | 280 | 213 | 162 | 151 | 103 |

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WATER CUSTOMERS

| | | 2024 | | | |
|---|---------------------------------------|---|---|---|---|
| Description (a) | Type of Meter ** (b) | Equivalent Factor (c) | Number of Ac Start of Year (d) | tive Customers End of Year (e) | Total Number of Meter Equivalents (c x e) (f) |
| Residential Service 5/8" 3/4" 1" 1 1/2" General Service 5/8" 3/4" 1" 1 1/2" 2" 3" 3" 3" Unmetered Customers Other (Specify) | D D D,T D D,T D,C,T D C T Fireflow 6" | 1.0 1.5 2.5 5.0 1.0 1.5 2.5 5.0 8.0 15.0 16.0 17.5 | 424 2 1 | | 435 0 0 0 0 11 0 7.5 10 24 |
| ** D = Displacement C = Compound T = Turbine | | Total | 450 | <u>455</u> | <u>491.67</u> |

WASTEWATER CUSTOMERS

2024

| | | 2024 | | | | |
|---------------------|----------|------------|---|---------|-------------|--|
| | | | Number of Active CustomersTotal Number of | | | |
| | Type of | Equivalent | Start | End ter | Equivalents | |
| Description | Meter ** | Factor | of Year | of Year | (c x e) | |
| (a) | (b) | (c) | (d) | (e) | (f) | |
| Residential Service | | | | | | |
| All meter sizes | D | 1.0 | 377 | 376 | 376 | |
| | | | | | | |
| General Service | | | | | | |
| 5/8" | Ð | 1.0 | 10 | 32 | 32 | |
| 3/4" | D | 1.5 | | | 0 | |
| 1" | D | 2.5 | 1 | 1 | 2.5 | |
| 1 1/2" | D,T | 5.0 | 2 | 2 | 10 | |
| 2" | D,C,T | 8.0 | | | 0 | |
| 3" | D | 15.0 | | | 0 | |
| 3" | С | 16.0 | | | 0 | |
| 3" | Т | 17.5 | | | 0 | |
| | | | | | | |
| Unmetered Customers | | | | | | |
| Other (Specify) | | | | | | |
| | | | | | | |
| ** D = Displacement | | | | | | |
| C = Compound | | Total | 390 | 411 | 420.5 | |
| T = Turbine | | | | | | |
| | | | | | | |

UTILITY NAME: LP WATERWORKS, INC.

WATER CUSTOMERS TEST YEAR

| | | IESI YEAK | | |
|---|-------------------------------------|---|----------------------------|---|
| Description (a) | Type of Meter ** (b) | Equivalent Factor (c) | End of Test Year (e) | Total Number of Meter Equivalents (c x e) (f) |
| Residential Service 5/8" 3/4" 1" 1 1/2" General Service 5/8" 3/4" 1" 1 1/2" 2" 3" 3" 3" Unmetered Customers Other (Specify) | D D D T D D D D T D C T Fireflow 6" | 1.0 1.5 2.5 5.0 1.0 1.5 2.5 5.0 8.0 15.0 16.0 17.5 | 435 | 435 0 0 0 0 11 0 7.5 10 24 |
| ** D = Displacement C = Compound T = Turbine | | Total | <u>455</u> | 491.67 |

WASTEWATER CUSTOMERS TEST YEAR

| | | | Total | Number of |
|---------------------|----------|------------|--------------|-------------|
| | Type of | Equivalent | End ter | Equivalents |
| Description | Meter ** | Factor | of Test Year | (c x e) |
| (a) | (b) | (c) | (e) | (f) |
| Residential Service | | | | |
| All meter sizes | D | 1.0 | 376 | 376 |
| | | | | |
| General Service | l | | | |
| 5/8" | D | 1.0 | 11 | 11 |
| 3/4" | D | 1.5 | | 0 |
| 1" | D | 2.5 | 1 | 2.5 |
| 1 1/2" | D,T | 5.0 | 2 | 10 |
| 2" | D,C,T | 8.0 | | 0 |
| 3" | D | 15.0 | | 0 |
| 3" | С | 16.0 | | 0 |
| 3" | T | 17.5 | | 0 |
| | | | | |
| Unmetered Customers | | | | |
| Other (Specify) | | | | |
| ** D = Displacement | | | | |
| C = Compound | | Total | 390 | 399.5 |
| T = Turbine | | | | |
| | | | | |

LP Waterworks, Inc.

Docket No. 20250013-WS

FACTORED ERCs & GALLONS - WATER

Test Year Ended 10/31/2024

(METER EQUIVALENT FACTORS BELOW)

| METER SIZE | ERC | NUMBER OF BILLS | FACTORED ERCs | GALLONS (000s) |
|---------------------------|-------|--------------------|------------------|----------------------|
| RESIDENTIAL | | | | |
| 5/8 x 3/4" | 1.0 | 5,217 | 5,217 | 5,979 |
| 1" | 2.5 | 0,217 | 0,217 | 0,575 |
| 1-1/2" | 5.0 | <u>0</u> | <u>0</u> | 0 |
| TOTAL RESIDENTIAL | 0.0 | <u>5,217</u> | <u>5,217</u> | 5,979 |
| | | 3,2 | <u> </u> | <u> </u> |
| GENERAL SERVICE | | | | |
| 5/8"x3/4" | 1.0 | 133 | 133 | 340 |
| 3/4" | 1.5 | 0 | 0 | . 0 |
| 1" | 2.5 | 35 | 88 | 14 |
| 1-1/2" | 5.0 | 24 | 120 | 90 |
| 2" | 8.0 | 36 | 288 | 1,559 |
| 3" COMPOUND | 16.0 | 0 | 0 | 0 |
| 4" COMPOUND | 25.0 | 0 | 0 | 0 |
| 6" COMPOUND | 50.0 | 0 | 0 | 0 |
| 8" COMPOUND | 80.0 | 0 | 0 | 0 |
| 10" COMPOUND | 115.0 | 0 | <u>0</u> | <u>0</u> |
| TOTAL GENERAL SERVICE | | <u>228</u> | <u>629</u> | <u>2,003</u> |
| PRIVATE FIRE PROTECTION | | | | |
| 2" | 0.7 | 0 | 0 | 0 |
| 3" COMPOUND | 1.3 | 0 | 0 | 0 |
| 4" COMPOUND | 2.1 | 0 | 0 | 0 |
| 6" COMPOUND | 4.2 | 12 | 50 | 0 |
| 8" COMPOUND | 6.7 | <u>0</u> | <u>0</u> | |
| TOTAL PRIVATE FIRE PROTEC | CTION | <u>12</u> | <u>50</u> | <u>0</u> <u>0</u> |
| TOTAL WATER | | <u>5.457</u> | <u>5.896</u> | 7,982 |

| METER SIZE | ERC | NUMBER OF BILLS | FACTORED ERCs | GALLONS (000s) |
|------------------------|----------|--------------------|------------------|-------------------|
| RESIDENTIAL | | | | |
| | | 4.500 | 4.500 | 0.700 |
| ALL METER SIZES | 1.0 | 4,509 | 4,509 | 3,726 |
| GENERAL SERVICE & MULT | I-FAMILY | | | |
| 5/8"x3/4" | 1.0 | 130 | 130 | 233 |
| 1" | 2.5 | 12 | 30 | 0 |
| 1-1/2" | 5.0 | 23 | 115 | 89 |
| 2" | 8.0 | 0 | 0 | 0 |
| 3" COMPOUND | 16.0 | 0 | 0 | 0 |
| 4" COMPOUND | 25.0 | 0 | 0 | 0 |
| 6" COMPOUND | 50.0 | 0 | 0 | 0 |
| 8" COMPOUND | 80.0 | 0 | 0 | 0 |
| 10" COMPOUND | 115.0 | <u>0</u> | <u>0</u> | <u>0</u> |
| TOTAL GENERAL SERVICE | | <u>165</u> | <u>275</u> | 322 |
| TOTAL WASTEWATER | | 4.674 | <u>4.784</u> | <u>4.048</u> |

| LP Waterworks, Inc. Wastewater Monthly Service Rates Test Year Ended 10/31/2024 | SCHEDULE NO. Docket No. 20250013 | | |
|---|-------------------------------------|-------------------------------|--------------------------------|
| | Rates Prior to Filing | Utility Requested Final | Four-year Rate Reduction |
| Residential | 1 111119 | | reduction |
| Base Facility Charge All Meter Sizes: | \$19.34 | \$18.82 | \$0.0 |
| Gallonage Charge - Per 1,000 | | | |
| gallons (8,000 gallon cap) | \$9.99 | \$14.60 | \$0.0 |
| General Service | | | |
| Base Facility Charge by Meter Size: | | | |
| 5/8" x 3/4" | \$19.34 | \$18.82 | \$0.0 |
| 3/4" | \$29.01 | \$28.23 | \$0.0 |
| 1" | \$48.35 | \$47.05 | \$0.0 |
| 1-1/2" | \$96.70 | \$94.11 | \$0.1 |
| 2" | \$154.72 | \$150.58 | \$0.2 |
| 3" | \$309.44 | \$301.15 | \$0.5 |
| 4" | \$483.50 | \$470.55 | \$0.8 |
| 6" | \$967.00 | \$941.10 | \$1.6 |
| Gallonage Charge, per 1,000 Gallons | \$12.00 | \$17.52 | \$0.0 |
| Typical Residential Bills 5/8" x 3/4" N | <u>leter</u> | | |
| 3,000 Gallons | \$49.31 | \$62.61 | |
| 5,000 Gallons | \$69.29 | | |
| 10,000 Gallons | \$79.28 | \$106.41 | |

Filtration

Disinfection

Pressure Sq. Ft._____ Gravity GPD/Sq.Ft.____

Chlorinator__ (Gas)

Ozone_____ Other_____Auxiliary Power_____ YEAR OF REPORT **DECEMBER 31**, 2024

SOURCE OF SUPPLY

| List for each source of supply (C | Ground, Surface, Purcha | sed Water etc.) | |
|------------------------------------|-------------------------|------------------|--|
| Permitted Gals. per day | 95,900 | 95,900 | |
| Type of Source | Ground | Ground | |
| | | | |
| WATER TREA | TMENT FACILITIES | | |
| List for each Water Treatment Fa | cility: | | |
| Type | | | |
| Make | | | |
| Permitted Capacity (GPD) | 95,900 | 95,900 | |
| High service pumping | | | |
| Gallons per minute | | | |
| Reverse Osmosis | | | |
| Lime Treatment | | | |
| Unit Rating | | | |
| Filtration | | | |

Superior

Superior

N/A

| UTILITY NAME: LP WATERWORKS, INC. SYSTEM NAME: WELLS AND WELL PUMPS | | | YEAR OF REPORT DECEMBER 31, 2024 | |
|---|--------------------------|-------------------------|-------------------------------------|-----|
| (a) | (b) | (c) | (d) | (e) |
| Year Constructed Types of Well Construction and Casing | | 1990 6"/4" | | |
| Depth of Wells | 50 | 830 4" 25 N/A | | |
| RESERVOIRS | | | | |
| (a) Description (steel, concrete) Capacity of Tank Ground or Elevated | (b) Steel 11,000 Ground | (c) Steel 14,000 Ground | (d) | (e) |
| HIGH SERVICE PUMPING N/A | | | | |
| (a) Motors Manufacturer Type Rated Horsepower | (b) | (c) | (d) | (e) |
| Pumps Manufacturer Type Capacity in GPM Average Number of Hours Operated Per Day Auxiliary Power | | | | |