

ORIGINAL

Sunny Hills

Docket No. 060368-WS

Application to Increase Rates and Charges
For a "Class A" Utility
In

Florida

VOLUME 6

Book 7

Set 48 of 57

Containing
Additional Engineering Requirements

Monthly Operating Reports

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

Aqua Utilities Florida, Inc.

DOCUMENT NUMBER-DATE

00878 JAN 26 8

FPSC-COMMISSION CLERK

Aqua Utilities Florida, Inc. Monthly Operating Reports

Sunny Hills

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

02-05-04 1.42	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: January, 2004

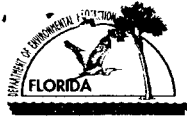
Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*														
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations						UV Dose		Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0											0.5	
2	X	24.0											0.6	
3		24.0												
4	X	24.0											0.6	
5	X	24.0											0.6	
6	X	24.0											0.6	
7	X	24.0											0.6	
8	X	24.0											0.6	
9	X	24.0											0.6	
10		24.0												
11	X	24.0											0.6	
12	X	24.0											0.6	
13	X	24.0											0.6	
14	X	24.0											0.6	
15	X	24.0											0.7	
16	X	24.0											0.7	
17		24.0												
18	X	24.0											0.7	
19	X	24.0											0.6	
20	X	24.0											0.5	
21	X	24.0											0.6	
22	X	24.0											0.6	
23	X	24.0											0.6	
24		24.0												
25	X	24.0											0.7	
26	X	24.0											0.7	
27	X	24.0											0.7	
28	X	24.0											0.5	
29	X	24.0											0.7	
30	X	24.0											0.6	
31		24.0												
Total														
Average														
Maximum														

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Harold Register	A	1913
Other Operators:	Jean H. Pitzer	C	7605

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

02-05-04 1.45	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number 1670647 Plant Name Sunny Hills Well# 4
 III. Daily Data for the Month/year of: January, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*
 CT Calculations
 Lowest CT Provided Disinfectant Contact Time
 Lowest Residual Disinfectant Concentration (C) at C
 Measurement Point During Customer Before or at First Disinfectant Customer Peak Flow, mg-min/L
 Temp. of Water, °C
 pH of Water, if Applicable
 Minimum CT Required, mg-min/L
 Lowest UV Dose, mW-sec/cm²
 Minimum UV Dose Required, mW-sec/cm²
 Remote Point in Distribution System, mg/L
 Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L
 Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation

Day of the Month	Days Plant Stated or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Peak Flow	Customer During Peak Flow, mg/L	Lowest Residual Disinfectant Concentration (C) Before or at First Disinfectant Customer Peak Flow, mg-min/L	Temp. of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X		24,000	24,0		1.0								
2	X		110,500	24,0		1.0								0.6
3			110,500	24,0		1.0								
4	X		125,000	24,0		1.0								0.6
5	X		106,000	24,0		1.0								0.6
6	X		105,000	24,0		1.0								0.6
7	X		87,000	24,0		1.0								0.6
8	X		100,000	24,0		1.0								0.6
9	X		95,500	24,0		1.0								0.6
10			95,500	24,0										
11	X		117,000	24,0		1.0								0.7
12	X		162,000	24,0		1.0								0.7
13	X		138,000	24,0		1.0								0.7
14	X		109,000	24,0		1.0								0.6
15	X		99,000	24,0		1.0								0.7
16	X		101,000	24,0		1.0								0.7
17			101,000	24,0										
18	X		111,000	24,0		1.0								0.7
19	X		111,000	24,0		1.0								0.7
20	X		103,000	24,0		1.0								0.7
21	X		107,000	24,0		1.0								0.7
22	X		108,000	24,0		1.0								0.7
23	X		101,000	24,0		1.0								0.7
24			101,000	24,0										
25	X		111,000	24,0		1.0								0.7
26	X		96,000	24,0		1.0								0.7
27	X		99,000	24,0		1.0								0.7
28	X		99,000	24,0		1.0								0.7
29	X		103,000	24,0		1.0								0.7
30	X		104,500	24,0		1.0								0.7
31			104,500	24,0										
Total			3,318,000											
Average			107,032											
Maximum			162,000											

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcarn Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Harold Register	A-1913
_____ 02-05-04 1.57	_____ Printed or Typed Name	_____ License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: January, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	1,000		1.0								0.6	
2	X	24.0	1,000		1.0								0.6	
3		24.0	1,000											
4	X	24.0	2,000		1.0								0.6	
5	X	24.0	1,000		1.0								0.7	
6	X	24.0	1,000		1.0								0.7	
7	X	24.0	1,000		1.0								0.7	
8	X	24.0	2,000		1.0								0.6	
9	X	24.0	1,000		1.0								0.6	
10		24.0	1,000											
11	X	24.0	1,000		0.9								0.6	
12	X	24.0	1,000		0.9								0.6	
13	X	24.0	1,000		0.8								0.6	
14	X	24.0	1,000		0.8								0.6	
15	X	24.0			0.8								0.6	
16	X	24.0	1,000		0.8								0.6	
17		24.0	500											
18	X	24.0	500		0.8								0.6	
19	X	24.0	1,000		0.8								0.6	
20	X	24.0	2,000		0.8								0.6	
21	X	24.0	1,000		0.8								0.6	
22	X	24.0	1,000		0.7								0.6	
23	X	24.0	1,000		0.8								0.6	
24		24.0	1,000											
25	X	24.0	1,000		0.8								0.6	
26	X	24.0	2,000		0.8								0.7	
27	X	24.0	1,000		0.8								0.7	
28	X	24.0	1,000		0.8								0.7	
29	X	24.0	1,000		0.8								0.7	
30	X	24.0	1,000		0.8								0.7	
31		24.0	1,000											
Total			33,000											
Average			1,065											
Maximum			2,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
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03-05-04 10.07	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 1

III. Daily Data for the Month/Year of: February, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations						UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg·min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Lowest Operating UV Dose, mW·sec/cm ²	Minimum UV Dose Required, mW·sec/cm ²				
1	X	24.0													0.6	
2	X	24.0													0.6	
3	X	24.0													0.5	
4	X	24.0													0.5	
5	X	24.0													0.5	
6	X	24.0													0.4	
7		24.0														
8	X	24.0													0.5	
9	X	24.0													0.5	
10	X	24.0													0.5	
11	X	24.0													0.6	
12	X	24.0													0.5	
13	X	24.0													0.4	
14		24.0														
15	X	24.0													0.5	
16	X	24.0													0.5	
17	X	24.0													0.5	
18	X	24.0													0.5	
19	X	24.0													0.5	
20	X	24.0													0.5	
21		24.0														
22	X	24.0													0.4	
23	X	24.0													0.4	
24	X	24.0													0.5	
25	X	24.0													0.5	
26	X	24.0													0.4	
27	X	24.0													0.4	
28		24.0														
29	X	24.0													0.5	
Total																
Average																
Maximum																

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
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PWS Owner:	Florida Water Services				
Contact Person:	Craig Anderson			Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando	State:	Florida
				Zip Code:	32860-9520
Contact Person's Telephone Number:	(407) 598-4199			Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 4			Plant Telephone Number:	(850) 773-2802	
Plant Address:	1533 Cash Circle			City:	Sunny Hills	
		State:	Florida	Zip Code:	32428	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift		
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift		

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

03-05-04 10.08	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: February, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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) (T) at C	Disinfectant Contact Time Before or at First Measurement	Lowest CT During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Remote Point in Distribution Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*		CT Calculations	
													UV Dose	UV Dose	UV Dose	UV Dose
1	X	24,000	24,000	1.0	1.0	1.0							0.6			
2	X	24,000	24,000	1.0	1.0	1.0							0.7			
3	X	24,000	24,000	1.0	1.0	1.0							0.7			
4	X	107,000	24,000	1.0	1.0	1.0							0.7			
5	X	113,000	24,000	0.7	0.7	0.7							0.4			
6	X	95,500	24,000	0.8	0.8	0.8							0.5			
7	X	95,500	24,000	1.0	1.0	1.0							0.6			
8	X	118,000	24,000	1.0	1.0	1.0							0.6			
9	X	107,000	24,000	1.0	1.0	1.0							0.7			
10	X	92,000	24,000	1.0	1.0	1.0							0.7			
11	X	106,000	24,000	1.0	1.0	1.0							0.7			
12	X	105,000	24,000	1.0	1.0	1.0							0.7			
13	X	97,000	24,000	0.8	0.8	0.8							0.6			
14		97,000	24,000													
15	X	121,000	24,000	0.9	0.9	0.9							0.7			
16	X	93,000	24,000	0.8	0.8	0.8							0.6			
17	X	129,000	24,000	0.9	0.9	0.9							0.7			
18	X	129,000	24,000	0.9	0.9	0.9							0.7			
19	X	109,000	24,000	0.9	0.9	0.9							0.7			
20	X	109,000	24,000	0.8	0.8	0.8							0.6			
21		109,000	24,000													
22	X	134,000	24,000	0.8	0.8	0.8							0.6			
23	X	110,000	24,000	0.8	0.8	0.8							0.6			
24	X	128,000	24,000	0.9	0.9	0.9							0.6			
25	X	116,000	24,000	0.9	0.9	0.9							0.6			
26	X	118,000	24,000	0.8	0.8	0.8							0.5			
27	X	132,000	24,000	0.9	0.9	0.9							0.5			
28		132,000	24,000													
29	X	143,000	24,000	0.9	0.9	0.9							0.5			
Total		3,309,000														
Average		114,103														
Maximum		143,000														

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	443	Total Population Served at End of Month:	1,107
PWS Owner:	Florida Water Services		
Contact Person:	Craig Anderson	Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando
		State:	Florida
		Zip Code:	32860-9520
Contact Person's Telephone Number:	(407) 598-4199	Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craiga@florida-water.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5	Plant Telephone Number:	(850) 773-2802
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills
		State:	Florida
		Zip Code:	32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	03-05-04 10.11	Harold Register	A-1913
		Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: February, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	1,000		0.8								0.6	
2	X	24.0	1,000		0.8								0.6	
3	X	24.0	1,000		0.8								0.6	
4	X	24.0	1,000		0.7								0.6	
5	X	24.0			0.7								0.6	
6	X	24.0	500		0.8								0.6	
7		24.0	500											
8	X	24.0	2,000		0.8								0.6	
9	X	24.0	1,000		0.8								0.6	
10	X	24.0	3,000		0.8								0.5	
11	X	24.0	1,000		0.8								0.5	
12	X	24.0	1,000		0.7								0.5	
13	X	24.0	1,500		0.7								0.5	
14		24.0	1,500											
15	X	24.0	1,000		0.8								0.5	
16	X	24.0	1,000		0.8								0.6	
17	X	24.0	2,000		0.8								0.6	
18	X	24.0			0.8								0.6	
19	X	24.0	1,000		0.8								0.6	
20	X	24.0	1,500		0.8								0.6	
21		24.0	1,500											
22	X	24.0	2,000		0.8								0.6	
23	X	24.0	1,000		0.7								0.5	
24	X	24.0	1,000		0.8								0.5	
25	X	24.0	9,000		0.7								0.5	
26	X	24.0	2,000		0.7								0.5	
27	X	24.0	1,000		0.7								0.5	
28		24.0	1,000											
29	X	24.0	2,000		0.7								0.5	
Total			43,000											
Average			1,483											
Maximum			9,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	March, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month: 443	Total Population Served at End of Month: 1,107		
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson	Contact Person's Title: VP Environmental Services		
Contact Person's Mailing Address: P.O. Box 609520	City: Orlando	State: Florida	Zip Code: 32860-9520
Contact Person's Telephone Number: (407) 598-4199	Contact Person's Fax Number: (407) 598-4217		
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1	Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gables Blvd.	City: Sunny Hills	State: Florida	Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

04-05-04 3-15P.M.	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/year of: March, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Operator (Place "X")	Hours plant in operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) at C	Disinfectant Contact Time (T) at C	Customer Before or at First Measurement Point During Peak Flow, minutes	Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		
																Lowest CT	UV Dose	UV Dose
1	X		24.0											0.4				
2	X		24.0											0.4				
3	X		24.0											0.4				
4	X		24.0											0.4				
5	X		24.0											0.4				
6			24.0															
7	X		24.0											0.5				
8	X		24.0											0.4				
9	X		24.0											0.4				
10	X		24.0											0.4				
11	X		24.0											0.4				
12	X		24.0											0.5				
13			24.0															
14	X		24.0											0.4				
15	X		24.0											0.4				
16	X		24.0											0.4				
17	X		24.0											0.4				
18	X		24.0											0.4				
19	X		24.0											0.4				
20			24.0															
21	X		24.0											0.5				
22	X		24.0											0.5				
23	X		24.0											0.5				
24	X		24.0											0.4				
25	X		24.0											0.4				
26	X		24.0											0.4				
27			24.0															
28	X		24.0											0.6				
29	X		24.0											0.5				
30	X		24.0											0.4				
31	X		24.0											0.3				
Total																		
Average																		
Maximum																		

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: 04-05-04 3-18P.M.

Printed or Typed Name: Harold Register

License Number: A-1913

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: March, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	133,000		0.8								0.5	
2	X	24.0	128,000		0.9								0.6	
3	X	24.0	126,000		0.9								0.6	
4	X	24.0	143,000		0.8								0.5	
5	X	24.0	110,500		0.8								0.5	
6		24.0	110,500											
7	X	24.0	135,000		0.8								0.5	
8	X	24.0	122,000		0.8								0.5	
9	X	24.0	120,000		0.8								0.6	
10	X	24.0	120,000		0.8								0.6	
11	X	24.0	139,000		0.8								0.5	
12	X	24.0	122,000		0.8								0.5	
13		24.0	122,000											
14	X	24.0	116,000		0.8								0.6	
15	X	24.0	93,000		0.7								0.5	
16	X	24.0	96,000		0.8								0.5	
17	X	24.0	169,000		0.8								0.5	
18	X	24.0	128,000		0.8								0.5	
19	X	24.0	149,500		0.6								0.4	
20		24.0	149,500											
21	X	24.0	138,000		0.8								0.5	
22	X	24.0	110,000		0.8								0.5	
23	X	24.0	129,000		0.8								0.5	
24	X	24.0	177,000		0.8								0.5	
25	X	24.0	147,000		0.8								0.6	
26	X	24.0	156,500		0.7								0.5	
27		24.0	156,500											
28	X	24.0	153,000		0.8								0.5	
29	X	24.0	127,000		0.8								0.5	
30	X	24.0	124,000		0.8								0.5	
31	X	24.0	122,000		0.7								0.4	
Total			4,072,000											
Average			131,355											
Maximum			177,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address:	P.O. Box 609520	City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well# 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.):	V		

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

04-05-04 3:20P.M. Signature and Date	Harold Register Printed or Typed Name	A-1913 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: March, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	1,000		0.8										0.5	
2	X	24.0	2,000		0.8										0.5	
3	X	24.0	1,000		0.7										0.4	
4	X	24.0	1,000		0.7										0.4	
5	X	24.0	1,000		0.8										0.4	
6		24.0	1,000													
7	X	24.0	1,000		0.8										0.5	
8	X	24.0	1,000		0.8										0.5	
9	X	24.0	1,000		0.7										0.4	
10	X	24.0	1,000		0.7										0.4	
11	X	24.0	2,000		0.6										0.4	
12	X	24.0	1,000		0.6										0.4	
13		24.0	1,000													
14	X	24.0	1,000		0.6										0.4	
15	X	24.0	1,000		0.7										0.4	
16	X	24.0	1,000		0.7										0.4	
17	X	24.0	1,000		0.8										0.5	
18	X	24.0	2,000		0.8										0.5	
19	X	24.0	1,000		0.8										0.5	
20		24.0	1,000													
21	X	24.0	1,000		0.8										0.5	
22	X	24.0	2,000		0.7										0.4	
23	X	24.0	1,000		0.7										0.4	
24	X	24.0	1,000		0.7										0.4	
25	X	24.0	1,000		0.7										0.4	
26	X	24.0	1,000		0.7										0.4	
27		24.0	1,000													
28	X	24.0	1,000		0.7										0.4	
29	X	24.0	1,000		0.7										0.4	
30	X	24.0	1,000		0.7										0.4	
31	X	24.0	1,000		0.7										0.4	
Total			35,000													
Average			1,129													
Maximum			2,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Zip Code: 32860-9520	
Contact Person's E-Mail Address: craiga@florida-water.com		Contact Person's Fax Number: (407) 598-4217	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

05-06-04 8.58	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 1

III. Daily Data for the Month/Year of: April, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started 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)	Disinfectant Contact Time Before or at First Measurement (T) at C	Flow, mg-ml/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*			Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
														UV Dose	UV Dose	UV Dose		
1	X	24.0															0.4	
2	X	24.0															0.4	
3		24.0																
4	X	24.0															0.6	
5	X	24.0															0.4	
6	X	24.0															0.5	
7	X	24.0															0.5	
8	X	24.0															0.4	
9	X	24.0															0.4	
10		24.0																
11	X	24.0															0.5	
12	X	24.0															0.4	
13	X	24.0															0.4	
14	X	24.0															0.4	
15	X	24.0															0.4	
16	X	24.0															0.5	
17		24.0																
18	X	24.0															0.5	
19	X	24.0															0.5	
20	X	24.0															0.5	
21	X	24.0															0.4	
22	X	24.0															0.4	
23	X	24.0															0.4	
24		24.0																
25	X	24.0															0.5	
26	X	24.0															0.3	
27	X	24.0															0.3	
28	X	24.0															0.3	
29	X	24.0															0.3	
30	X	24.0															0.3	
Total																		
Average																		
Maximum																		

* Refer to the instructions for this report to determine which plants must provide this information

DEF Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida Zip Code: 32860-9520
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913 Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605 Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

05-06-04 8.59	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1670647 | Plant Name: Sunny Hills Well# 4 | April, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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 Measurement	Disinfectant Contact Time (T) at C	Lowest CT	Provided First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, sec/cm ²	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
														UV Dose	CT Calculations
1	X	24.0	149,000	0.8										0.4	
2	X	24.0	184,500	0.7										0.4	
3		24.0	184,500												
4	X	24.0	219,000	0.8										0.5	
5	X	24.0	159,000	0.8										0.5	
6	X	24.0	230,000	0.8										0.5	
7	X	24.0	254,000	0.8										0.5	
8	X	24.0	157,000	0.8										0.4	
9	X	24.0	170,000	0.5										0.3	
10		24.0	170,000												
11	X	24.0	137,000	0.8										0.4	
12	X	24.0	138,000	0.8										0.5	
13	X	24.0	125,000	0.8										0.4	
14	X	24.0	138,000	0.7										0.4	
15	X	24.0	137,000	0.8										0.4	
16	X	24.0	144,500	0.8										0.5	
17		24.0	144,500												
18	X	24.0	162,000	0.8										0.5	
19	X	24.0	152,000	0.8										0.5	
20	X	24.0	151,000	0.8										0.5	
21	X	24.0	162,000	0.9										0.5	
22	X	24.0	129,000	0.8										0.5	
23	X	24.0	140,000	0.7										0.4	
24		24.0	140,000												
25	X	24.0	170,000	0.9										0.5	
26	X	24.0	122,000	0.5										0.3	
27	X	24.0	145,000	0.8										0.4	
28	X	24.0	165,000	0.8										0.4	
29	X	24.0	149,000	0.9										0.5	
30	X	24.0	143,000	0.8										0.4	
Total		4,771,000													
Average		159,033													
Maximum		254,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	443	Total Population Served at End of Month:	1,107
PWS Owner:	Florida Water Services		
Contact Person:	Craig Anderson	Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando
		State:	Florida
		Zip Code:	32860-9520
Contact Person's Telephone Number:	(407) 598-4199	Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5	Plant Telephone Number:	(850) 773-2802
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills
		State:	Florida
		Zip Code:	32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		

Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000

Plant Category (per subsection 62-699.310(4), F.A.C.): V Plant Class (per subsection 62-699.310(4), F.A.C.): C

Licensed Operators	Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: 05-04-04 9:00 Printed or Typed Name: Harold Register License Number: A-1913

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: April, 2004

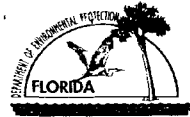
Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0	1,000		0.8										0.4
2	X	24.0	1,000		0.8										0.4
3		24.0	1,000												
4	X	24.0	2,000		0.8										0.5
5	X	24.0	1,000		0.8										0.5
6	X	24.0	4,000		0.8										0.5
7	X	24.0	1,000		0.7										0.4
8	X	24.0	1,000		0.7										0.4
9	X	24.0	1,000		0.7										0.4
10		24.0	1,000												
11	X	24.0	1,000		0.7										0.4
12	X	24.0	13,000		0.7										0.4
13	X	24.0	1,000		0.7										0.4
14	X	24.0	1,000		0.7										0.4
15	X	24.0	1,000		0.8										0.4
16	X	24.0	1,500		0.8										0.5
17		24.0	1,500												
18	X	24.0			0.8										0.5
19	X	24.0	1,000		0.7										0.4
20	X	24.0	2,000		0.8										0.4
21	X	24.0	1,000		0.7										0.4
22	X	24.0	1,000		0.6										0.3
23	X	24.0	1,000		0.6										0.3
24		24.0	1,000												
25	X	24.0	1,000		0.7										0.4
26	X	24.0	1,000		0.5										0.3
27	X	24.0	2,000		0.6										0.3
28	X	24.0	2,000		0.5										0.3
29	X	24.0	1,000		0.4										0.3
30	X	24.0	1,000		0.5										0.3
Total			49,000												
Average			1,633												
Maximum			13,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well# 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

06-03-04 8:00	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: May, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*									Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.
				CT Calculations					UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²		
1		24.0												
2	X	24.0												0.5
3	X	24.0												0.4
4	X	24.0												0.5
5	X	24.0												0.5
6	X	24.0												0.5
7	X	24.0												0.5
8		24.0												
9	X	24.0												0.6
10	X	24.0												0.5
11	X	24.0												0.5
12	X	24.0												0.4
13	X	24.0												0.3
14	X	24.0												0.3
15		24.0												
16	X	24.0												0.6
17	X	24.0												0.4
18	X	24.0												0.4
19	X	24.0												0.4
20	X	24.0												0.4
21	X	24.0	1,000											0.4
22		24.0	1,000											
23	X	24.0												0.5
24	X	24.0												0.4
25	X	24.0												0.7
26	X	24.0												0.7
27	X	24.0												0.3
28	X	24.0												0.3
29		24.0												
30	X	24.0												0.6
31	X	24.0												0.6
Total			2,000											
Average			65											
Maximum			1,000											

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-555 900(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Harold Register	A	1913
Other Operators:	Jean H. Pitzer	C	7605

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

06-03-04 8.10

Printed or Typed Name

Harold Register

License Number

A-1913

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: May, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1		24.0	103,000												
2	X	24.0	143,000		1.0									0.6	
3	X	24.0	137,000		1.0									0.6	
4	X	24.0	141,000		1.0									0.6	
5	X	24.0	160,000		1.0									0.6	
6	X	24.0	161,000		0.9									0.6	
7	X	24.0	176,000		0.9									0.6	
8		24.0	176,000												
9	X	24.0	193,000		1.0									0.6	
10	X	24.0	204,000		1.0									0.5	
11	X	24.0	180,000		0.9									0.5	
12	X	24.0	153,000		0.9									0.5	
13	X	24.0	186,000		0.7									0.4	
14	X	24.0	178,000		0.8									0.4	
15		24.0	178,000												
16	X	24.0	173,000		1.0									0.5	
17	X	24.0	153,000		1.0									0.5	
18	X	24.0	155,000		1.0									0.6	
19	X	24.0	164,000		0.9									0.5	
20	X	24.0	229,000		0.7									0.4	
21	X	24.0	167,000		0.8									0.4	
22		24.0	167,000												
23	X	24.0	185,000		0.9									0.6	
24	X	24.0	191,000		0.9									0.6	
25	X	24.0	192,000		1.0									0.7	
26	X	24.0	222,000		1.0									0.7	
27	X	24.0	196,000		0.7									0.4	
28	X	24.0	209,000		0.6									0.3	
29		24.0	209,000												
30	X	24.0	233,000		1.0									0.5	
31	X	24.0	191,000		0.9									0.6	
Total			5,505,000												
Average			177,581												
Maximum			233,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	May, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community		<input type="checkbox"/> Non-Transient Non-Community	
<input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
		Zip Code: 32860-9520	
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

06-3-04 8.20	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: May, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1		24.0												
2	X	24.0	2,000		0.6								0.4	
3	X	24.0	1,000		0.5								0.3	
4	X	24.0	1,000		0.6								0.4	
5	X	24.0	1,000		0.6								0.4	
6	X	24.0	1,000		0.7								0.5	
7	X	24.0	1,000		0.6								0.4	
8		24.0	1,000											
9	X	24.0	1,000		0.6								0.4	
10	X	24.0	1,000		0.6								0.4	
11	X	24.0	1,000		0.6								0.4	
12	X	24.0	2,000		0.6								0.4	
13	X	24.0	1,000		0.6								0.4	
14	X	24.0	1,000		0.5								0.3	
15		24.0	1,000		0.5								0.3	
16	X	24.0	2,000											
17	X	24.0	2,000		0.7								0.4	
18	X	24.0	2,000		0.7								0.4	
19	X	24.0	2,000		0.7								0.4	
20	X	24.0	1,000		0.7								0.4	
21		24.0	1,500		0.7								0.4	
22	X	24.0	1,500		0.6								0.4	
23	X	24.0	2,000											
24	X	24.0	1,000		0.7								0.5	
25	X	24.0	2,000		0.7								0.4	
26	X	24.0	2,000		0.8								0.5	
27	X	24.0	1,000		0.8								0.5	
28		24.0	2,000		0.7								0.4	
29	X	24.0	2,000		0.7								0.4	
30	X	24.0	1,000											
31		24.0	2,000		0.8								0.5	
Total			43,000											
Average			1,387											
Maximum			2,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Florida Water Services			
Contact Person: Craig Anderson		Contact Person's Title: VP Environmental Services	
Contact Person's Mailing Address: P.O. Box 609520		City: Orlando	State: Florida
Contact Person's Telephone Number: (407) 598-4199		Contact Person's Fax Number: (407) 598-4217	
Contact Person's E-Mail Address: craiga@florida-water.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well# 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913 / Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605 / Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: _____
07-01-04 7.36

Printed or Typed Name: Harold Register

License Number: A-1913

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: June, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out-of-Operation	
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L		
1	X	24.0												0.5	
2	X	24.0												0.5	
3	X	24.0	1,000											0.7	
4	X	24.0												0.5	
5		24.0													
6	X	24.0												1.1	
7	X	24.0												1.0	
8	X	24.0												0.9	
9	X	24.0												0.9	
10	X	24.0												0.7	
11	X	24.0												0.4	
12		24.0													
13	X	24.0												0.6	
14	X	24.0												0.5	
15	X	24.0												0.5	
16	X	24.0												0.5	
17	X	24.0												0.4	
18	X	24.0												0.4	
19		24.0													
20	X	24.0												0.4	
21	X	24.0												0.4	
22	X	24.0												0.4	
23	X	24.0												0.3	
24	X	24.0												0.3	
25	X	24.0												0.3	
26		24.0													
27	X	24.0												0.4	
28	X	24.0												0.3	
29	X	24.0												0.4	
30	X	24.0												0.4	
Total			1,000												
Average			33												
Maximum			1,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2004

A. Public Water System (PWS) Information

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>443</u>		Total Population Served at End of Month: <u>1,107</u>	
PWS Owner: <u>Florida Water Services</u>			
Contact Person: <u>Craig Anderson</u>		Contact Person's Title: <u>VP Environmental Services</u>	
Contact Person's Mailing Address: <u>P.O. Box 609520</u>		City: <u>Orlando</u>	State: <u>Florida</u> Zip Code: <u>32860-9520</u>
Contact Person's Telephone Number: <u>(407) 598-4199</u>		Contact Person's Fax Number: <u>(407) 598-4217</u>	
Contact Person's E-Mail Address: <u>craiga@florida-water.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Well # 4</u>		Plant Telephone Number: <u>(850) 773-2802</u>	
Plant Address: <u>1533 Cash Circle</u>		City: <u>Sunny Hills</u>	State: <u>Florida</u> Zip Code: <u>32428</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Harold Register</u>	<u>A</u>	<u>1913</u> / Days 1st Shift
Other Operators:	<u>Jean H. Pitzer</u>	<u>C</u>	<u>7605</u> / Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

<u>07-01-04 7:38</u> Signature and Date	<u>Harold Register</u> Printed or Typed Name	<u>A-1913</u> License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: June, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Started 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	Measurement (T) at C	Disinfectant Contact Time Provided Before or at First Customer During Peak Flow, minutes	Lowest CT	Temp of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*																
															CT Calculations	UV Dose															
1	X		184,000	24.0												0.8															
2	X		224,000	24.0												0.7															
3	X		265,000	24.0												0.7															
4	X		231,000	24.0												0.6															
5			231,000	24.0																											
6	X		249,000	24.0												0.8															
7	X		137,000	24.0												0.7															
8	X		123,000	24.0												0.6															
9	X		124,000	24.0												0.6															
10	X		106,000	24.0												0.6															
11	X		151,000	24.0												0.6															
12			151,000	24.0																											
13	X		125,000	24.0												0.7															
14	X		107,000	24.0												0.6															
15	X		110,000	24.0												0.6															
16	X		119,000	24.0												0.4															
17	X		121,000	24.0												0.4															
18	X		120,500	24.0												0.5															
19			120,500	24.0																											
20	X		130,000	24.0												0.5															
21	X		118,000	24.0												0.5															
22	X		116,000	24.0												0.5															
23	X		112,000	24.0												0.5															
24	X		125,000	24.0												0.4															
25	X		139,500	24.0												0.3															
26			139,500	24.0																											
27	X		134,000	24.0												0.3															
28	X		126,000	24.0												0.5															
29	X		139,000	24.0												0.5															
30	X		117,000	24.0												0.4															
Total																4,395,000															
Average																146,500															
Maximum																265,000															

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	443	Total Population Served at End of Month:	1,107
PWS Owner:	Florida Water Services		
Contact Person:	Craig Anderson	Contact Person's Title:	VP Environmental Services
Contact Person's Mailing Address:	P.O. Box 609520	City:	Orlando
		State:	Florida
		Zip Code:	32860-9520
Contact Person's Telephone Number:	(407) 598-4199	Contact Person's Fax Number:	(407) 598-4217
Contact Person's E-Mail Address:	craig@florida-water.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5	Plant Telephone Number:	(850) 773-2802
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Harold Register	A	1913	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.40	Harold Register	A-1913
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: Jun, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	2,000		0.8								0.6	
2	X	24.0	2,000		0.8								0.5	
3	X	24.0	1,000		0.7								0.4	
4	X	24.0	2,000		0.7								0.4	
5		24.0	2,000											
6	X	24.0	2,000		0.8								0.5	
7	X	24.0	1,000		0.7								0.4	
8	X	24.0	2,000		0.7								0.4	
9	X	24.0	1,000		0.7								0.4	
10	X	24.0	1,000		0.7								0.4	
11	X	24.0	2,000		0.7								0.4	
12		24.0	2,000											
13	X	24.0	4,000		0.7								0.4	
14	X	24.0	1,000		0.6								0.3	
15	X	24.0	2,000		0.6								0.3	
16	X	24.0	1,000		0.5								0.2	
17	X	24.0			0.4								0.2	
18	X	24.0	1,500		0.5								0.2	
19		24.0	1,500											
20	X	24.0	2,000		0.5								0.2	
21	X	24.0	1,000		0.5								0.2	
22	X	24.0	2,000		0.6								0.3	
23	X	24.0	1,000		0.6								0.4	
24	X	24.0	2,000		0.7								0.4	
25	X	24.0	3,000		0.9								0.5	
26		24.0	3,000											
27	X	24.0	2,000		1.5								1.0	
28	X	24.0	2,000		1.2								1.0	
29	X	24.0	2,000		0.9								0.7	
30	X	24.0	2,000		0.7								0.4	
Total			53,000											
Average			1,767											
Maximum			4,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	July, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida		Contact Person's Title: Area Manager	
Contact Person: Michael Fitzgerald		Contact Person's Fax Number: 352/732-6027	
Contact Person's Mailing Address:	1343 NE 17th Road	City: Ocala	State: Florida
Contact Person's Telephone Number:	352/369-4881	Zip Code: 34470	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802			
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida		
Type of Water Treatment by Plant:		<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:		1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators		Name	License Class	License Number	Day(s)/Shift(s) Worked
Lead/Chief Operator:	Mark March		C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer		C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Printed or Typed Name	License Number
07-01-04 7.36	Mark March	C-8287

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 1

III. Daily Data for the Month/Year of: July, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0												0.4	
2	X	24.0												0.4	
3		24.0													
4	X	24.0												0.3	
5	X	24.0												0.3	
6	X	24.0												0.3	
7	X	24.0												0.3	
8	X	24.0												0.3	
9	X	24.0												0.3	
10	X	24.0												0.5	
11		24.0													
12	X	24.0												0.5	
13	X	24.0												0.4	
14	X	24.0												0.4	
15	X	24.0												0.4	
16	X	24.0												0.4	
17	X	24.0												0.3	1
18		24.0													
19	X	24.0												0.3	
20	X	24.0												0.4	
21	X	24.0												0.4	
22	X	24.0												0.4	
23	X	24.0												0.4	
24	X	24.0												0.5	
25		24.0													
26	X	24.0												0.4	
27	X	24.0												0.4	
28	X	24.0												0.4	
29	X	24.0												0.3	
30	X	24.0												0.3	
31	X	24.0												0.3	
Total															
Average															
Maximum															

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2004

A. Public Water System (PWS) Information

PWS Name: <u>Sunny Hills</u>		PWS Identification Number: <u>1670647</u>	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: <u>443</u>		Total Population Served at End of Month: <u>1,107</u>	
PWS Owner: <u>Aqua Utilities Florida</u>			
Contact Person: <u>Michael Fitzgerald</u>		Contact Person's Title: <u>Area Manager</u>	
Contact Person's Mailing Address: <u>1343 NE 17th Road</u>		City: <u>Ocala</u>	State: <u>Florida</u> Zip Code: <u>34470</u>
Contact Person's Telephone Number: <u>352/369-4881</u>		Contact Person's Fax Number: <u>352/732-6027</u>	
Contact Person's E-Mail Address: <u>mvfitzgerald@aquaaamerica.com</u>			

B. Water Treatment Plant Information

Plant Name: <u>Sunny Hills Well # 4</u>		Plant Telephone Number: <u>(850) 773-2802</u>	
Plant Address: <u>1533 Cash Circle</u>		City: <u>Sunny Hills</u>	State: <u>Florida</u> Zip Code: <u>32428</u>
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: <u>1,224,000</u>			
Plant Category (per subsection 62-699.310(4), F.A.C.): <u>V</u>		Plant Class (per subsection 62-699.310(4), F.A.C.): <u>C</u>	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	<u>Mark March</u>	<u>C</u>	<u>8287</u> / Days 1st Shift
Other Operators:	<u>Jean H. Pitzer</u>	<u>C</u>	<u>7605</u> / Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date 07-01-04 7.38

Printed or Typed Name Mark March

License Number C-8287

MONTHLY OPERATION REPORT FOR PW'S TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: July, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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 Measurement (1) at C Point During Peak Flow, mg/L	Disinfectant Contact Time Provided Before or at First Customer Measurement (1) at C Point During Peak Flow, minutes	Temp of Water, °C If Applicable	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Distribution Remote Point in Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demolstrate Four-Log Virus Inactivation, if Applicable*	
												UV Dose	UV Dose
1	X	135,000	24.0	0.7							0.4	0.4	
2	X	143,000	24.0	0.7							0.4	0.4	
3	X	130,000	24.0	0.6							0.3	0.3	
4	X	143,000	24.0	0.6							0.4	0.4	
5	X	123,000	24.0	0.7							0.4	0.4	
6	X	152,000	24.0	0.6							0.3	0.3	
7	X	147,000	24.0	0.6							0.3	0.3	
8	X	151,000	24.0	0.9							0.5	0.5	
9	X	239,000	24.0	0.9							0.5	0.5	
10	X	149,000	24.0	0.9							0.5	0.5	
11		149,000	24.0										
12	X	195,000	24.0	0.6							0.4	0.4	
13	X	209,000	24.0	0.5							0.3	0.3	
14	X	271,000	24.0	0.7							0.4	0.4	
15	X	176,000	24.0	0.8							0.4	0.4	
16	X	278,000	24.0	0.9							0.5	0.5	
17	X	206,500	24.0	0.5							0.3	0.3	1
18		206,500	24.0										
19	X	220,000	24.0	0.5							0.3	0.3	
20	X	231,000	24.0	0.9							0.4	0.4	
21	X	224,000	24.0	0.9							0.4	0.4	
22	X	193,000	24.0	0.6							3.0	0.4	
23	X	198,000	24.0	0.7							0.4	0.4	
24	X	215,000	24.0	0.8							0.4	0.4	
25		215,000	24.0										
26	X	204,000	24.0	0.8							0.4	0.4	
27	X	205,000	24.0	0.8							0.4	0.4	
28	X	200,000	24.0	0.7							0.4	0.4	
29	X	151,000	24.0	0.8							0.5	0.5	
30	X	155,000	24.0	0.8							0.5	0.5	
31	X	278,000	24.0										
Total		5,614,000											
Average		187,133											
Maximum		278,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Contact Person's Fax Number: 352/732-3213	
Contact Person's E-Mail Address: mvfitzgerald@aguaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
Other Operators:	Jean H. Pitzer	C	7605

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.40	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: July, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	1,000		1.0								0.6	
2	X	24.0	2,500		0.7								0.4	
3		24.0	2,500											
4	X	24.0	1,000		0.8								0.5	
5	X	24.0	1,000		0.8								0.4	
6	X	24.0	2,000		0.8								0.4	
7	X	24.0	3,000		0.7								0.4	
8	X	24.0	1,000		0.7								0.4	
9	X	24.0	2,000		0.8								0.5	
10	X	24.0	1,500		0.7								0.4	
11		24.0	1,500											
12	X	24.0	1,000		0.8								0.4	
13	X	24.0	2,000		0.7								0.4	
14	X	24.0	4,000		0.7								0.4	
15	X	24.0	2,000		0.8								0.4	
16	X	24.0	2,000		0.8								0.4	
17	X	24.0	1,500		0.8								0.3	1
18		24.0	1,500											
19	X	24.0	1,000		0.7								0.3	
20	X	24.0	2,000		0.7								0.3	
21	X	24.0	1,000		0.8								0.4	
22	X	24.0	2,000		0.8								0.4	
23	X	24.0	2,000		0.8								0.4	
24	X	24.0	2,500		0.8								0.4	
25		24.0	2,500											
26	X	24.0	1,000		0.7								0.4	
27	X	24.0	2,000		0.7								0.4	
28	X	24.0	1,000		0.7								0.4	
29	X	24.0	2,000		0.8								0.5	
30	X	24.0	2,000		0.7								0.4	
31	X	24.0												
Total			54,000											
Average			1,800											
Maximum			4,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Contact Person's Fax Number: 352/732-6027	
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.36	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1 August, 2004

III. Daily Data for the Month/year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Peak Flow, mg/L	Disinfectant Concentration (C) Before or at First Point During Customer Measurement (T) at C	Disinfectant Contact Time Provided Before or at First Customer Measurement During Peak Flow, minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	UV Dose, mW-sec/cm ²	Lowest Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
												UV Dose	UV Dose
1		24.0											
2	X	24.0											
3	X	24.0											
4	X	24.0											
5	X	24.0											
6	X	24.0											
7	X	24.0											
8		24.0											
9	X	24.0											
10	X	24.0											
11	X	24.0											
12	X	24.0											
13	X	24.0											
14	X	24.0											
15		24.0											
16	X	24.0											
17	X	24.0											
18	X	24.0											
19	X	24.0											
20	X	24.0											
21	X	24.0											
22		24.0											
23	X	24.0											
24	X	24.0											
25	X	24.0											
26	X	24.0											
27	X	24.0											
28	X	24.0											
29		24.0											
30	X	24.0											
31	X	24.0											
Total													
Average													
Maximum													

* Refer to the instructions for this report to determine which plants must provide this information. DEP Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Zip Code: 34470	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com		Contact Person's Fax Number: 352/732-6027	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.38 Signature and Date	Mark March Printed or Typed Name	C-8287 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: August, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*							Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.
				CT Calculations				UV Dose				
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L		
1		24.0	159,000									
2	X	24.0	151,000		0.8							0.4
3	X	24.0	142,000		0.8							0.4
4	X	24.0	136,000		0.7							0.3
5	X	24.0	177,000		0.8							0.4
6	X	24.0	144,500		0.6							0.3
7	X	24.0	144,500		0.5							0.3
8		24.0	145,000									
9	X	24.0	145,000		0.6							0.3
10	X	24.0	128,000		0.7							0.4
11	X	24.0	140,000		0.8							0.5
12	X	24.0	150,000		0.8							0.5
13	X	24.0	151,500		0.8							0.5
14	X	24.0	151,500		0.8							0.4
15		24.0	155,000									
16	X	24.0	205,000		0.7							0.4
17	X	24.0	183,000		0.7							0.4
18	X	24.0	183,000		0.5							0.3
19	X	24.0	214,000		0.6							0.4
20	X	24.0	178,500		0.6							0.4
21	X	24.0	178,500		0.8							0.4
22		24.0	221,000									0.5
23	X	24.0	220,000		0.8							0.5
24	X	24.0	167,000		0.7							0.4
25	X	24.0	198,000		0.7							0.4
26	X	24.0	214,000		0.7							0.4
27	X	24.0	154,500		0.8							0.4
28	X	24.0	154,500		0.8							0.4
29		24.0	175,000									0.4
30	X	24.0	180,000		0.6							0.3
31	X	24.0										
Total			5,046,000									
Average			168,200									
Maximum			221,000									

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443	Total Population Served at End of Month: 1,107		
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald	Contact Person's Title: Area Manager		
Contact Person's Mailing Address: 1343 NE 17th Road	City: Ocala	State: Florida	Zip Code: 34470
Contact Person's Telephone Number: 352/369-4881	Contact Person's Fax Number: 352/732-3213		
Contact Person's E-Mail Address: mvfitzgerald@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5	Plant Telephone Number: (850) 773-2802			
Plant Address: 1240 Elkcam Blvd.	City: Sunny Hills	State: Florida	Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	07-01-04 7.40	Mark March	C-8287
		Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 5 August, 2004

III. Daily Data for the Month/year of: August, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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	Disinfectant Measurement (T) at C Contact Time Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C If Applicable	pH of Water, If Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	Remote Point in Distribution Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
												UV Dose	UV Dose

1	24.0	2,000		0.8									0.8	
2	24.0	3,000		0.8									0.8	
3	24.0			0.8									0.4	
4	24.0	4,000		0.8									0.4	
5	24.0	2,000		0.7									0.3	
6	24.0	2,000		0.5									0.3	
7	24.0	2,000		0.5									0.3	
8	24.0	2,000		0.5									0.3	
9	24.0	2,000		0.5									0.3	
10	24.0	2,000		0.5									0.3	
11	24.0	2,000		0.6									0.4	
12	24.0	1,000		0.6									0.4	
13	24.0	1,500		0.6									0.4	
14	24.0	1,500		0.6									0.4	
15	24.0	2,000												
16	24.0	2,000		0.6									0.5	
17	24.0	4,000		0.6									0.4	
18	24.0	2,000		0.6									0.4	
19	24.0	2,000		0.6									0.4	
20	24.0	2,000		0.7									0.4	
21	24.0	2,000		0.7									0.4	
22	24.0	1,000												
23	24.0	2,000		0.7									0.4	
24	24.0	2,000		0.6									0.3	
25	24.0	1,000		0.6									0.3	
26	24.0	2,000		0.7									0.4	
27	24.0	1,000		0.7									0.4	
28	24.0	1,000		0.7									0.4	
29	24.0	2,000												
30	24.0	1,000		0.7									0.4	
31	24.0													
Total		56,000												
Average		1,867												
Maximum		4,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Zip Code: 34470	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com		Contact Person's Fax Number: 352/732-6027	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
Other Operators:	Jean H. Pitzer	C	7605

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date _____
07-01-04 7.36

Printed or Typed Name _____
Mark March

License Number _____
C-8287

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: September, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations						UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0													0.4	
2	X	24.0													0.4	
3	X	24.0													0.4	
4	X	24.0													0.4	
5		24.0														
6	X	24.0													0.3	
7	X	24.0													0.3	
8	X	24.0	3,000												0.3	
9	X	24.0													0.3	
10	X	24.0													0.3	
11	X	24.0													0.3	
12		24.0														
13	X	24.0													0.3	
14	X	24.0													0.3	
15	X	24.0													0.3	
16	X	24.0													0.3	
17	X	24.0													0.3	
18	X	24.0													0.3	
19		24.0														
20	X	24.0													0.3	
21	X	24.0													0.3	
22	X	24.0													0.3	
23	X	24.0													0.4	
24	X	24.0													0.4	
25	X	24.0													0.5	
26		24.0														
27	X	24.0													0.4	
28	X	24.0													0.4	
29	X	24.0													0.5	
30	X	24.0													0.5	
31		24.0														
Total			3,000													
Average			97													
Maximum			3,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	September, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Zip Code: 34470	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com		Contact Person's Fax Number: 352/732-6027	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.38	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: September, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	131,000		0.8										0.5	
2	X	24.0	128,000		0.8										0.4	
3	X	24.0	150,000		0.7										0.3	
4	X	24.0	141,500		0.8										0.4	
5		24.0	141,500													
6	X	24.0	137,000		0.8										0.4	
7	X	24.0	144,000		0.7										0.4	
8	X	24.0	168,000		0.8										0.3	
9	X	24.0	121,000		0.7										0.3	
10	X	24.0	129,000		0.7										0.4	
11	X	24.0	109,000		0.7										0.4	
12		24.0	109,000													
13	X	24.0	119,000		0.8										0.5	
14	X	24.0	125,000		0.7										0.5	
15	X	24.0	134,000		0.7										0.5	
16	X	24.0	134,000		0.6										0.4	
17	X	24.0	246,000		0.5										0.4	
18	X	24.0	122,500		0.5										0.4	
19		24.0	122,500													
20	X	24.0	141,000		0.6										0.4	
21	X	24.0	149,000		0.6										0.4	
22	X	24.0	183,000		0.6										0.4	
23	X	24.0	144,000		0.5										0.3	
24	X	24.0	147,000		0.7										0.4	
25	X	24.0	142,000		0.8										0.4	
26		24.0	142,000													
27	X	24.0	121,000		0.8										0.4	
28	X	24.0	146,000		0.8										0.4	
29	X	24.0	143,000		0.8										0.4	
30	X	24.0	152,000		0.8										0.4	
31		24.0														
Total			4,222,000													
Average			140,733													
Maximum			246,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	443	Total Population Served at End of Month:	1,107
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Michael Fitzgerald	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala
		State:	Florida
		Zip Code:	34470
Contact Person's Telephone Number:	352/369-4881	Contact Person's Fax Number:	352/732-3213
Contact Person's E-Mail Address:	mvfitzgerald@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5	Plant Telephone Number:	(850) 773-2802
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills
		State:	Florida
		Zip Code:	32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	07-01-04 7.40	Mark March	C-8287
		Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: September, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		CT Calculations		
												UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	
1	X	24.0	3,000	0.7		0.7					0.4					
2	X	24.0	2,000	0.7		0.7					0.4					
3	X	24.0	6,000	0.7		0.7					0.3					
4	X	24.0	1,500	0.7		0.7					0.4					
5		24.0	1,500								0.4					
6	X	24.0	1,000	0.7		0.7					0.4					
7	X	24.0	1,000	0.7		0.7					0.4					
8	X	24.0	2,000	0.7		0.7					0.4					
9	X	24.0	1,000	0.7		0.7					0.3					
10	X	24.0	2,000	0.6		0.6					0.3					
11	X	24.0	2,000	0.6		0.6					0.3					
12		24.0	2,000													
13	X	24.0	1,000	0.5		0.5					0.3					
14	X	24.0	1,000	0.5		0.5					0.3					
15	X	24.0	1,000	0.6		0.6					0.3					
16	X	24.0	2,000	0.5		0.5					0.3					
17	X	24.0	3,000	0.6		0.6					0.3					
18	X	24.0	1,000	0.5		0.5					0.3					
19		24.0	1,000													
20	X	24.0	1,000	0.5		0.5					0.3					
21	X	24.0	1,000	0.5		0.5					0.3					
22	X	24.0	1,000	0.5		0.5					0.3					
23	X	24.0	1,000	0.6		0.6					0.4					
24	X	24.0	2,000	0.5		0.5					0.4					
25	X	24.0	2,000	0.6		0.6					0.4					
26		24.0	2,000													
27	X	24.0	3,000	0.6		0.6					0.4					
28	X	24.0	3,000	0.5		0.5					0.4					
29	X	24.0	1,000	0.5		0.5					0.3					
30	X	24.0	1,000	0.5		0.5					0.3					
31		24.0														
		Total	53,000													
		Average	1,767													
		Maximum	6,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34470	
Contact Person's Telephone Number: 352/369-4881		Contact Person's Fax Number: 352/732-6027	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287 / Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605 / Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.36	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: October, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation		
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L			
1	X	24.0													0.5	
2	X	24.0													0.5	
3		24.0														
4	X	24.0													0.4	
5	X	24.0													0.4	
6	X	24.0													0.4	
7	X	24.0	4,000												0.5	
8	X	24.0													0.4	
9	X	24.0													0.5	
10		24.0														
11	X	24.0													0.4	
12	X	24.0													0.4	
13	X	24.0													0.4	
14	X	24.0													0.4	
15	X	24.0													0.4	
16	X	24.0													0.4	
17		24.0														
18	X	24.0													0.5	
19	X	24.0													0.5	
20	X	24.0													0.4	
21	X	24.0													0.4	
22	X	24.0													0.3	
23	X	24.0													0.3	
24		24.0														
25	X	24.0													0.3	
26	X	24.0													0.3	
27	X	24.0													0.3	
28	X	24.0													0.3	
29	X	24.0													0.3	
30	X	24.0													0.3	
31		24.0													0.4	
Total			4,000													
Average			129													
Maximum			4,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	October, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
		Zip Code: 34470	
Contact Person's Telephone Number: 352/369-4881		Contact Person's Fax Number: 352/732-6027	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.38	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 4

III. Daily Data for the Month/year of: October, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Peak Flow	Disinfectant Residual Concentration (C) Before or at First Customer Point During Measurement (T) at C	Disinfectant Provided Before or at First Customer Point During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Disinfectant	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
														UV Dose	System, mg/L
1	X	192,000	24.0	X	0.8									0.4	
2	X	147,500	24.0	X	0.7									0.3	
3		147,500	24.0												
4	X	163,000	24.0	X	0.7									0.3	
5	X	169,000	24.0	X	0.7									0.4	
6	X	151,000	24.0	X	0.8									0.4	
7	X	150,000	24.0	X	0.9									0.6	
8	X	155,000	24.0	X	0.8									0.4	
9	X	160,000	24.0	X	0.8									0.4	
10		160,000	24.0											0.4	
11	X	105,000	24.0	X	0.8									0.4	
12	X	154,000	24.0	X	0.7									0.3	
13	X	151,000	24.0	X	0.7									0.3	
14	X	148,000	24.0	X	0.7									0.3	
15	X	37,000	24.0	X	0.8									0.4	
16	X	230,000	24.0	X	0.8									0.3	
17		230,000	24.0												
18	X	150,000	24.0	X	0.8									0.4	
19	X	137,000	24.0	X	0.8									0.4	
20	X	133,000	24.0	X	0.7									0.4	
21	X	135,000	24.0	X	0.7									0.4	
22	X	235,000	24.0	X	0.7									0.4	
23	X	87,000	24.0	X	0.7									0.4	
24		87,000	24.0												
25	X	141,000	24.0	X	0.7									0.4	
26	X	140,000	24.0	X	0.8									0.4	
27	X	141,000	24.0	X	0.6									0.3	
28	X	138,000	24.0	X	0.7									0.4	
29	X	140,000	24.0	X	0.8									0.4	
30	X	161,000	24.0	X	0.6									0.4	
31		161,000	24.0												
Total		4,475,000													
Average		149,167													
Maximum		235,000													

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Michael Fitzgerald		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: 352/369-4881		Zip Code: 34470	
Contact Person's E-Mail Address: mvfitzgerald@aquaaamerica.com		Contact Person's Fax Number: 352/732-3213	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.40	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 5

III. Daily Data for the Month/year of: October, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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 Measurement (T) at C	Disinfectant Contact Time Before or at Lowest CT	First Customer Measurement (T) at C	Flow, mg-min/L During Peak	Temp of Water, °C If Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Remote Point Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Days of the Month	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*			CT Calculations			Total	Average	Maximum						
																Lowest CT	UV Dose	UV Dose	Lowest CT	UV Dose	UV Dose				Total	Average	Maximum			
1	X	24.0	1,000	0.6											1	24.0	1,000	0.6							36,000	1,200	4,000			
2	X	24.0	1,000	0.6											2	24.0	1,000	0.6									36,000	1,200	4,000	
3		24.0	1,000	0.5											3	24.0	1,000	0.5										36,000	1,200	4,000
4	X	24.0	1,000	0.5											4	24.0	1,000	0.5										36,000	1,200	4,000
5	X	24.0	2,000	0.5											5	24.0	2,000	0.5										36,000	1,200	4,000
6	X	24.0	1,000	0.6											6	24.0	1,000	0.6										36,000	1,200	4,000
7	X	24.0	2,000	0.6											7	24.0	2,000	0.6										36,000	1,200	4,000
8	X	24.0	2,000	0.5											8	24.0	2,000	0.5										36,000	1,200	4,000
9	X	24.0	1,000	0.5											9	24.0	1,000	0.5										36,000	1,200	4,000
10	X	24.0	1,000	0.5											10	24.0	1,000	0.5										36,000	1,200	4,000
11	X	24.0	1,000	0.5											11	24.0	1,000	0.5										36,000	1,200	4,000
12	X	24.0	1,000	0.5											12	24.0	1,000	0.5										36,000	1,200	4,000
13	X	24.0	1,000	0.5											13	24.0	1,000	0.5										36,000	1,200	4,000
14	X	24.0	1,000	0.5											14	24.0	1,000	0.5										36,000	1,200	4,000
15	X	24.0	1,000	0.6											15	24.0	1,000	0.6										36,000	1,200	4,000
16	X	24.0	1,000	0.6											16	24.0	1,000	0.6										36,000	1,200	4,000
17	X	24.0	1,000	0.6											17	24.0	1,000	0.6										36,000	1,200	4,000
18	X	24.0	1,000	0.5											18	24.0	1,000	0.5										36,000	1,200	4,000
19	X	24.0	2,000	0.5											19	24.0	2,000	0.5										36,000	1,200	4,000
20	X	24.0	1,000	0.5											20	24.0	1,000	0.5										36,000	1,200	4,000
21	X	24.0	2,000	0.5											21	24.0	2,000	0.5										36,000	1,200	4,000
22	X	24.0	1,000	0.5											22	24.0	1,000	0.5										36,000	1,200	4,000
23	X	24.0	1,000	0.5											23	24.0	1,000	0.5										36,000	1,200	4,000
24	X	24.0	1,000	0.5											24	24.0	1,000	0.5										36,000	1,200	4,000
25	X	24.0	1,000	0.5											25	24.0	1,000	0.5										36,000	1,200	4,000
26	X	24.0	1,000	0.5											26	24.0	1,000	0.5										36,000	1,200	4,000
27	X	24.0	2,000	0.4											27	24.0	2,000	0.4										36,000	1,200	4,000
28	X	24.0	4,000	0.4											28	24.0	4,000	0.4										36,000	1,200	4,000
29	X	24.0	2,000	0.6											29	24.0	2,000	0.6										36,000	1,200	4,000
30	X	24.0	1,000	0.6											30	24.0	1,000	0.6										36,000	1,200	4,000
31		24.0													31	24.0												36,000	1,200	4,000

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	November, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address:	1343 NE 17th Road	City: Ocala	State: Florida
Contact Person's Telephone Number:	(352) 732-6027	Contact Person's Fax Number:	(352) 732-6027
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well# 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant:		<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water
Permitted Maximum Day Operating Capacity of Plant, gallons per day:		1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.):		V	
Plant Class (per subsection 62-699.310(4), F.A.C.):		C	

Licensed Operators	Name	License Class	License Number	Day(s)/ Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.36	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well# 1
 III. Daily Data for the Month/year of: November, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*

Day of the Month	Days Plant Staffed or Visited by Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (T) at C Before or at First Measurement	Peak Flow, mg-Flow, min/L	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	System, mg/L	Days Plant Staffed or Visited by Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (T) at C Before or at First Measurement	Peak Flow, mg-Flow, min/L	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Operating UV Dose, mW-sec/cm ²	System, mg/L	CT Calculations		
																									Provided	Contact Time	CT

1	X		24.0																							
2	X		24.0																							
3	X		24.0																							
4	X		24.0																							
5	X		24.0																							
6	X		24.0																							
7			24.0																							
8	X		24.0																							
9	X		24.0																							
10	X		24.0																							
11	X		24.0																							
12	X		24.0																							
13	X		24.0																							
14			24.0																							
15	X		24.0																							
16	X		24.0																							
17	X		24.0																							
18	X		24.0	3,000																						
19	X		24.0																							
20	X		24.0																							
21			24.0																							
22	X		24.0																							
23	X		24.0																							
24	X		24.0																							
25	X		24.0																							
26	X		24.0																							
27	X		24.0																							
28			24.0																							
29	X		24.0																							
30	X		24.0																							
31			24.0																							

Total 3,000
Average 97
Maximum 3,000

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of:	November, 2004
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A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 443		Total Population Served at End of Month: 1,107	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-6027	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Mark March	C	8287
Other Operators:	Jean H. Pitzer	C	7605

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.38	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: November, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started or Visited by Operator in the (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 Measurement Point During Peak Flow.	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer During Peak Flow, mg-minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW-sec/cm ²	Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
													UV Dose	UV Dose
1	X	143,000	24.0	0.7								0.3		0.3
2	X	140,000	24.0	0.6								0.3		0.3
3	X	140,000	24.0	0.5								0.3		0.3
4	X	142,000	24.0	0.7								0.4		0.4
5	X	140,000	24.0	0.8								0.4		0.4
6	X	176,500	24.0	0.8								0.4		0.4
7		176,500	24.0											
8	X	162,000	24.0	0.8								0.4		0.4
9	X	168,000	24.0	0.8								0.4		0.4
10	X	150,000	24.0	0.8								0.4		0.4
11	X	124,000	24.0	0.9								0.4		0.4
12	X	136,000	24.0	0.8								0.3		0.3
13	X	101,500	24.0	0.7								0.4		0.4
14		130,000	24.0											
15	X	130,000	24.0	0.7								0.3		0.3
16	X	109,000	24.0	0.7								0.3		0.3
17	X	118,000	24.0	0.7								0.3		0.3
18	X	112,000	24.0	0.7								0.3		0.3
19	X	153,000	24.0	0.8								0.4		0.4
20	X	87,000	24.0	0.8								0.4		0.4
21		87,000	24.0											
22	X	120,000	24.0	0.8								0.4		0.4
23	X	96,000	24.0	0.7								0.4		0.4
24	X	170,000	24.0	0.7								0.3		0.3
25	X	102,000	24.0	0.7								0.3		0.3
26	X	104,000	24.0	0.7								0.3		0.3
27	X	112,500	24.0	0.8								0.4		0.4
28		112,500	24.0											
29	X	111,000	24.0	0.9								0.4		0.4
30	X	109,000	24.0	0.8								0.4		0.4
31		176,500	24.0											
Total		3,834,000												
Average		127,800												
Maximum		176,500												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	443			Total Population Served at End of Month:	1,107
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala	State:	Florida
Contact Person's Telephone Number:	(352) 732-6027			Contact Person's Fax Number:	(352) 732-6027
Contact Person's E-Mail Address:	beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5			Plant Telephone Number:	(850) 773-2802
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water			<input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Mark March	C	8287	Days 1st Shift
Other Operators:	Jean H. Pitzer	C	7605	Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

07-01-04 7.40	Mark March	C-8287
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: November, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	1,000		0.6										0.3	
2	X	24.0	1,000		0.6										0.3	
3	X	24.0	2,000		0.5										0.3	
4	X	24.0			0.6										0.4	
5	X	24.0	2,000		0.5										0.4	
6	X	24.0	1,000		0.6										0.4	
7		24.0	1,000													
8	X	24.0			0.6										0.3	
9	X	24.0	1,000		0.6										0.3	
10	X	24.0	1,000		0.6										0.4	
11	X	24.0	1,000		0.7										0.4	
12	X	24.0	1,000		0.7										0.4	
13	X	24.0	1,000		0.7										0.5	
14		24.0	1,000													
15	X	24.0	1,000		0.6										0.4	
16	X	24.0			0.6										0.3	
17	X	24.0	1,000		0.6										0.3	
18	X	24.0	1,000		0.6										0.4	
19	X	24.0	1,000		0.4										0.3	
20	X	24.0	1,000		0.5										0.3	
21		24.0	1,000													
22	X	24.0	1,000		0.6										0.4	
23	X	24.0			0.6										0.4	
24	X	24.0	1,000		0.6										0.4	
25	X	24.0	1,000		0.5										0.3	
26	X	24.0	1,000		0.5										0.2	
27	X	24.0			0.6										0.3	
28		24.0														
29	X	24.0	1,000		0.6										0.3	
30	X	24.0	500		0.6										0.3	
31		24.0														
Total			25,500													
Average			850													
Maximum			2,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 483		Total Population Served at End of Month: 1,642	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-6027	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant:		<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Jean Pitzer	C7605
Signature and Date	Printed or Typed Name	License Number

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

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: December, 2004

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started 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 Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Customer Measurement Point During Peak Flow, minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	CT Calculations	Days of the Month (Place "X")	Day of the Month	Total		
															Average	Maximum	Minimum
1													X	1	24.0		
2													X	2	24.0		
3													X	3	24.0		
4													X	4	24.0		
5														5	24.0		
6													X	6	24.0		
7													X	7	24.0		
8													X	8	24.0		
9													X	9	24.0		
10													X	10	24.0		
11													X	11	24.0		
12														12	24.0		
13													X	13	24.0		
14													X	14	24.0		
15													X	15	24.0		
16													X	16	24.0		
17													X	17	24.0		
18													X	18	24.0		
19														19	24.0		
20													X	20	24.0		
21													X	21	24.0		
22													X	22	24.0		
23													X	23	24.0		
24													X	24	24.0		
25														25	24.0		
26													X	26	24.0		
27													X	27	24.0		
28													X	28	24.0		
29													X	29	24.0		
30													X	30	24.0		
31													X	31	24.0		

* Refer to the instructions for this report to determine which plants must provide this information

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2004

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	483			Total Population Served at End of Month:	1,642
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	1343 NE 17th Road	City:	Ocala	State:	Florida
				Zip Code:	34470
Contact Person's Telephone Number:	(352) 732-6027			Contact Person's Fax Number:	(352) 732-6027
Contact Person's E-Mail Address:	<u>beheath@aquamerica.com</u>				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 4			Plant Telephone Number:	(850) 773-2802
Plant Address:	1533 Cash Circle	City:	Sunny Hills	State:	Florida
				Zip Code:	32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	
				C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift	
Other Operators:					

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Jean Pitzer</u>	<u>C7605</u>
	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4 December, 2004

III. Daily Data for the Month/year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator ("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	Disinfectant Contact Time (T) at C	Customer First	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, min/L	Lowest UV Dose, mW-sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations, if Applicable*		Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
													Lowest CT	UV Dose		
1	X		24,000	24,0	0.7							0.4				
2	X		94,000	24,0	0.7							0.4				
3	X		110,000	24,0	0.8							0.4				
4	X		117,000	24,0	0.6							0.3				
5			117,000	24,0												
6	X		108,000	24,0	0.6							0.3				
7	X		108,000	24,0	0.6							0.4				
8	X		103,000	24,0	0.7							0.4				
9	X		107,000	24,0	0.8							0.4				
10	X		105,000	24,0	0.8							0.4				
11	X		111,000	24,0	0.8							0.4				
12			111,000	24,0												
13	X		114,000	24,0	0.7							0.4				
14	X		112,000	24,0	0.7							0.4				
15	X		115,000	24,0	0.6							0.3				
16	X		125,000	24,0	0.6							0.3				
17	X		100,000	24,0	0.7							0.4				
18	X		126,000	24,0	0.6							0.4				
19			126,000	24,0												
20	X		119,000	24,0	0.6							0.3				
21	X		121,000	24,0	0.8							0.5				
22	X		120,000	24,0	0.8							0.5				
23	X		133,000	24,0	0.8							0.5				
24	X		133,000	24,0	0.7							0.4				
25			133,000	24,0												
26	X		92,000	24,0	0.8							0.5				
27	X		132,000	24,0	0.8							0.5				
28	X		115,000	24,0	0.8							0.4				
29	X		113,000	24,0	0.8							0.4				
30	X		179,000	24,0	0.7							0.4				
31	X		140,000	24,0												
			Total	3,670,000												
			Average	118,387												
			Maximum	179,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2004

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 483		Total Population Served at End of Month: 1,642	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: 1343 NE 17th Road		City: Ocala	State: Florida Zip Code: 34470
Contact Person's Telephone Number: (352) 732-6027		Contact Person's Fax Number: (352) 732-6027	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605 Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Jean Pitzer	C7605
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: December, 2004

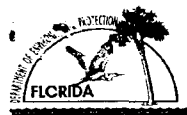
Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out-of-Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	1,000		0.5										0.3	
2	X	24.0			0.6										0.3	
3	X	24.0	1,000		0.6										0.3	
4	X	24.0	500		0.5										0.3	
5		24.0	500													
6	X	24.0	1,000		0.6										0.3	
7	X	24.0	1,000		0.7										0.4	
8	X	24.0			0.7										0.5	
9	X	24.0			0.6										0.2	
10	X	24.0	1,000		0.5										0.3	
11	X	24.0	500		0.6										0.3	
12		24.0	500													
13	X	24.0	1,000		0.6										0.3	
14	X	24.0			0.7										0.4	
15	X	24.0	1,000		0.6										0.3	
16	X	24.0	1,000		0.6										0.3	
17	X	24.0			0.5										0.3	
18	X	24.0	500		0.5										0.3	
19		24.0	500													
20	X	24.0			0.5										0.3	
21	X	24.0	1,000		0.5										0.3	
22	X	24.0			0.5										0.3	
23	X	24.0	1,000		0.5										0.3	
24	X	24.0	500		0.5										0.3	
25		24.0	500													
26	X	24.0			0.6										0.4	
27	X	24.0			0.6										0.4	
28	X	24.0	1,000		0.6										0.3	
29	X	24.0	1,000		0.6										0.4	
30	X	24.0	1,000		0.6										0.4	
31	X	24.0														
Total			17,000													
Average			567													
Maximum			1,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 483		Total Population Served at End of Month: 1,642	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: January, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0										0.3	
2		24.0											
3	X	24.0										0.3	
4	X	24.0										0.4	
5	X	24.0										0.3	
6	X	24.0										0.3	
7	X	24.0										0.4	
8	X	24.0										0.4	
9		24.0											
10	X	24.0										0.3	
11	X	24.0										0.3	
12	X	24.0										0.3	
13	X	24.0										0.3	
14	X	24.0										0.4	
15		24.0											
16	X	24.0										0.3	
17	X	24.0										0.3	
18	X	24.0										0.4	
19	X	24.0										0.5	
20	X	24.0										0.4	
21	X	24.0										0.4	
22	X	24.0										0.3	
23		24.0											
24	X	24.0										0.3	
25	X	24.0										0.2	
26	X	24.0										0.2	
27	X	24.0										0.3	
28	X	24.0										0.3	
29	X	24.0										0.3	
30		24.0											
31	X	24.0											
Total													
Average													
Maximum													

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-555 900(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 483		Total Population Served at End of Month: 1,642	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Jean Pitzer

Printed or Typed Name

C7605

License Number

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

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/year of: January, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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 Measurement	Disinfectant Contact Time (T) at C	Lowest CT Provided	Customer Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm	Required UV Dose, mW-sec/cm	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*		
														CT Calculations	UV Dose	UV Dose
1	X	114,500	24.0	114,500	0.7								0.4			
2	X	114,500	24.0	120,000	0.6								0.3			
3	X	120,000	24.0	120,000	0.6								0.3			
4	X	120,000	24.0	117,000	0.6								0.3			
5	X	117,000	24.0	119,000	0.6								0.4			
6	X	119,000	24.0	154,000	0.7								0.4			
7	X	154,000	24.0	101,500	0.6								0.4			
8	X	101,500	24.0	101,500	0.6								0.4			
9	X	101,500	24.0	120,000	0.6								0.3			
10	X	120,000	24.0	111,000	0.6								0.3			
11	X	111,000	24.0	114,000	0.7								0.4			
12	X	114,000	24.0	113,000	0.7								0.4			
13	X	113,000	24.0	137,000	0.7								0.4			
14	X	137,000	24.0	137,000	0.7								0.4			
15	X	137,000	24.0	80,000	0.7								0.3			
16	X	80,000	24.0	109,000	0.7								0.4			
17	X	109,000	24.0	169,000	0.7								0.4			
18	X	169,000	24.0	158,000	0.6								0.4			
19	X	158,000	24.0	122,000	0.7								0.4			
20	X	122,000	24.0	206,000	0.7								0.4			
21	X	206,000	24.0	102,500	0.8								0.4			
22	X	102,500	24.0	102,500	0.8								0.4			
23	X	102,500	24.0	126,000	0.6								0.3			
24	X	126,000	24.0	183,000	0.5								0.2			
25	X	183,000	24.0	124,000	0.5								0.2			
26	X	124,000	24.0	155,000	0.8								0.5			
27	X	155,000	24.0	114,000	0.9								0.5			
28	X	114,000	24.0	114,000	0.9								0.5			
29		114,000	24.0	103,000	0.9								0.5			
30	X	103,000	24.0	123,000	0.9								0.5			
31	X	123,000	24.0	3,879,000												
Total		3,879,000														
Average		125,129														
Maximum		206,000														

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: January, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 483	Total Population Served at End of Month: 1,642
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaamerica.com	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5	Plant Telephone Number: (850) 773-2802
Plant Address: 1240 Elkcam Blvd.	City: Sunny Hills State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C
Licensed Operators	Name License Class License Number Day(s) / Shift(s) Worked
Lead/Chief Operator: Jean H. Pitzer	C 7605 Days 1st Shift
Other Operators:	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date _____ Printed or Typed Name Jean Pitzer License Number C7605

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: January, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	1,000		0.5										0.3	
2		24.0	1,000													
3	X	24.0			0.4											0.3
4	X	24.0	1,000		0.5											0.3
5	X	24.0			0.5											0.3
6	X	24.0			0.6											0.4
7	X	24.0	1,000		0.6											0.4
8	X	24.0	1,000		0.5											0.4
9		24.0	1,000													
10	X	24.0	1,000		0.6											0.3
11	X	24.0	1,000		0.6											0.3
12	X	24.0	1,000		0.6											0.3
13	X	24.0			0.7											0.4
14	X	24.0	500		0.6											0.3
15		24.0	500													
16	X	24.0			0.6											0.3
17	X	24.0	1,000		0.6											0.3
18	X	24.0			0.6											0.3
19	X	24.0	1,000		0.6											0.3
20	X	24.0			0.5											0.3
21	X	24.0	1,000		0.6											0.3
22	X	24.0			0.6											0.3
23		24.0														
24	X	24.0	1,000		0.5											0.3
25	X	24.0			0.5											0.3
26	X	24.0	1,000		0.5											0.3
27	X	24.0	1,000		0.5											0.3
28	X	24.0			0.5											0.3
29	X	24.0	1,000		0.6											0.4
30		24.0														
31	X	24.0														
Total			17,000													
Average			548													
Maximum			1,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477	Total Population Served at End of Month: 1,670
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaaamerica.com	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1	Plant Telephone Number: (850) 773-2802
Plant Address: 3810 Gables Blvd.	City: Sunny Hills State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C
Licensed Operators	Name License Class License Number Day(s) / Shift(s) Worked
Lead/Chief Operator: Jean H. Pitzer	C 7605 Days 1st Shift
Other Operators:	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: February, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0										0.3	
2	X	24.0										0.3	
3	X	24.0										0.3	
4	X	24.0										0.3	
5	X	24.0										0.3	
6		24.0											
7	X	24.0										0.3	
8	X	24.0										0.3	
9	X	24.0										0.3	
10	X	24.0										0.3	
11	X	24.0										0.3	
12	X	24.0										0.2	
13		24.0											
14	X	24.0										0.4	
15	X	24.0										0.4	
16	X	24.0										0.4	
17	X	24.0										0.4	
18	X	24.0										0.3	
19	X	24.0										0.3	
20		24.0											
21	X	24.0										0.2	
22	X	24.0										0.2	
23	X	24.0										0.3	
24	X	24.0										0.3	
25	X	24.0										0.4	
26	X	24.0										0.3	
27		24.0											
28	X	24.0										0.4	
29		24.0											
30		24.0											
31		24.0											

Total	
Average	
Maximum	

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477	Total Population Served at End of Month: 1,670		
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath	Contact Person's Title: Area Manager		
Contact Person's Mailing Address: PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333		
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4	Plant Telephone Number: (850) 773-2802			
Plant Address: 1533 Cash Circle	City: Sunny Hills	State: Florida	Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date _____ Jean Pitzer _____ C7605 _____
 Printed or Typed Name License Number

MONTHLY OPERATION REPORT FOR PWS'S TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/year of: February, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator ("X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd	Peak Flow, mg/L	Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Customer Measurement Point During Peak Flow, minutes	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Lowest UV Dose, mW-sec/cm ²	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*				
													Lowest Residual Disinfectant Concentration at	UV Dose Required, mW-sec/cm ²	UV Dose		
1	X	130,000	24.0	0.6								0.3					
2	X	131,000	24.0	0.6								0.3					
3	X	161,000	24.0	0.7								0.4					
4	X	143,000	24.0	0.6								0.3					
5	X	109,500	24.0	0.5								0.3					
6		109,500	24.0														
7	X	133,000	24.0	0.7								0.4					
8	X	131,000	24.0	0.6								0.3					
9	X	112,000	24.0	0.6								0.3					
10	X	129,000	24.0	0.7								0.4					
11	X	153,000	24.0	0.7								0.4					
12	X	107,500	24.0	0.7								0.4					
13		107,500	24.0														
14	X	127,000	24.0	0.6								0.3					
15	X	121,000	24.0	0.7								0.4					
16	X	94,000	24.0	0.7								0.4					
17	X	118,000	24.0	0.8								0.4					
18	X	167,000	24.0	0.8								0.4					
19	X	94,000	24.0	0.8								0.4					
20		94,000	24.0														
21	X	151,000	24.0	0.7								0.3					
22	X	107,000	24.0	0.6								0.3					
23	X	104,000	24.0	0.5								0.3					
24	X	108,000	24.0	0.6								0.3					
25	X	167,000	24.0	0.7								0.4					
26	X	100,000	24.0	0.8								0.4					
27		100,000	24.0														
28	X	100,000	24.0	0.8								0.4					
29			24.0														
30			24.0														
31			24.0														
Total		3,409,000															
Average		109,968															
Maximum		167,000															

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: February, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	477			Total Population Served at End of Month:	1,670	
PWS Owner:	Aqua Utilities Florida					
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager	
Contact Person's Mailing Address:	PO Box 490310			City:	Leesburg	State: Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Address:	beheath@aquaafrica.com					

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5			Plant Telephone Number:	(850) 773-2802	
Plant Address:	1240 Elkcam Blvd.			City:	Sunny Hills	State: Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					

Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators:	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift		
Other Operators:						

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Jean Pitzer</u> Printed or Typed Name	<u>C7605</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: February, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0			0.6								0.4	
2	X	24.0	1,000		0.6								0.3	
3	X	24.0			0.5								0.3	
4	X	24.0	1,000		0.6								0.3	
5	X	24.0	500		0.5								0.3	
6		24.0	500											
7	X	24.0			0.6								0.4	
8	X	24.0	1,000		0.6								0.3	
9	X	24.0			0.6								0.3	
10	X	24.0	1,000		0.6								0.3	
11	X	24.0			0.6								0.2	
12	X	24.0	500		0.7								0.3	
13		24.0	500											
14	X	24.0	1,000		0.6								0.3	
15	X	24.0			0.6								0.3	
16	X	24.0	1,000		0.6								0.3	
17	X	24.0	3,000		0.6								0.3	
18	X	24.0	5,000		0.6								0.3	
19	X	24.0	1,500		0.6								0.3	
20		24.0	1,500											
21	X	24.0	1,000		0.7								0.4	
22	X	24.0	1,000		0.7								0.3	
23	X	24.0			0.7								0.3	
24	X	24.0			0.7								0.3	
25	X	24.0			0.7								0.3	
26	X	24.0	500		0.6								0.3	
27		24.0	500											
28	X	24.0			0.8								0.4	
29		24.0												
30		24.0												
31		24.0												
Total			22,000											
Average			710											
Maximum			5,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			Days 1st Shift

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: March, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0										0.3	
2	X	24.0										0.4	
3	X	24.0										0.4	
4	X	24.0										0.4	
5	X	24.0										0.3	
6		24.0											
7	X	24.0										0.3	
8	X	24.0										0.3	
9	X	24.0										0.4	
10	X	24.0										0.3	
11	X	24.0										0.3	
12	X	24.0										0.2	
13		24.0											
14	X	24.0										0.3	
15	X	24.0	2,000		0.4							0.3	
16	X	24.0										0.2	
17	X	24.0										0.2	
18	X	24.0										0.2	
19	X	24.0										0.2	
20		24.0											
21	X	24.0										0.3	
22	X	24.0										0.3	
23	X	24.0										0.4	
24	X	24.0										0.4	
25	X	24.0										0.4	
26	X	24.0										0.4	
27		24.0											
28	X	24.0										0.5	
29	X	24.0										0.5	
30	X	24.0										0.5	
31	X	24.0										0.5	
Total			2,000										
Average			65										
Maximum			2,000										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: March, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0	126,000		0.8										0.4	
2	X	24.0	108,000		0.8										0.4	
3	X	24.0	104,000		0.7										0.4	
4	X	24.0	153,000		0.8										0.5	
5	X	24.0	116,500		0.7										0.5	
6		24.0	116,500													
7	X	24.0	118,000		0.6										0.2	
8	X	24.0	107,000		0.7										0.2	
9	X	24.0	106,000		0.6										0.3	
10	X	24.0	123,000		0.8										0.4	
11	X	24.0	126,000		0.8										0.4	
12	X	24.0	119,500		0.6										0.3	
13		24.0	119,500													
14	X	24.0	174,000		0.8										0.4	
15	X	24.0	86,000		0.8										0.4	
16	X	24.0	116,000		0.8										0.4	
17	X	24.0	123,000		0.8										0.4	
18	X	24.0	159,000		0.6										0.3	
19	X	24.0	107,000		0.5										0.3	
20		24.0	107,000													
21	X	24.0	136,000		0.5										0.3	
22	X	24.0	167,000		0.5										0.3	
23	X	24.0	193,000		0.5										0.3	
24	X	24.0	171,000		0.8										0.4	
25	X	24.0	145,000		0.8										0.4	
26	X	24.0	109,500		0.8										0.4	
27		24.0	109,500													
28	X	24.0	106,000		0.8										0.4	
29	X	24.0	123,000		0.8										0.4	
30	X	24.0	127,000		0.7										0.4	
31	X	24.0	128,000													
Total			3,930,000													
Average			126,774													
Maximum			193,000													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: March, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number / Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605 / Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: March, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L.	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	1,000		0.7									0.3	
2	X	24.0			0.6									0.3	
3	X	24.0	1,000		0.4									0.3	
4	X	24.0	1,000		0.6									0.3	
5	X	24.0			0.6									0.3	
6		24.0													
7	X	24.0	1,000		0.6									0.3	
8	X	24.0	1,000		0.7									0.4	
9	X	24.0			0.6									0.4	
10	X	24.0	1,000		0.6									0.4	
11	X	24.0			0.7									0.4	
12	X	24.0	1,000		0.6									0.4	
13		24.0	1,000												
14	X	24.0	1,000		0.5									0.3	
15	X	24.0	2,000		0.5									0.3	
16	X	24.0	1,000		0.4									0.3	
17	X	24.0	1,000		0.5									0.3	
18	X	24.0			0.6									0.4	
19	X	24.0	1,000		0.6									0.4	
20		24.0	1,000												
21	X	24.0	1,000		0.5									0.3	
22	X	24.0	1,000		0.5									0.3	
23	X	24.0	1,000		0.5									0.3	
24	X	24.0			0.5									0.3	
25	X	24.0	1,000		0.5									0.3	
26	X	24.0	500		0.5									0.3	
27		24.0	500												
28	X	24.0			0.5									0.3	
29	X	24.0	1,000		0.5									0.3	
30	X	24.0	2,000		0.5									0.3	
31	X	24.0													
Total			23,000												
Average			742												
Maximum			2,000												

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	477	Total Population Served at End of Month:	1,670
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 1		Plant Telephone Number:	(850) 773-2802	
Plant Address:	3810 Gables Blvd.		City: Sunny Hills	State: Florida	Zip Code: 32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift	
Other Operators:					

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: April, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0										0.4	
2	X	24.0										0.3	
3		24.0											
4	X	24.0											
5	X	24.0											
6	X	24.0											
7	X	24.0											
8	X	24.0											
9	X	24.0											
10		24.0											
11	X	24.0											
12	X	24.0											
13	X	24.0											
14	X	24.0											
15	X	24.0											
16	X	24.0											
17		24.0											
18	X	24.0											
19	X	24.0											
20	X	24.0											
21	X	24.0											
22	X	24.0											
23	X	24.0											
24		24.0											
25	X	24.0											
26	X	24.0											
27	X	24.0											
28	X	24.0											
29	X	24.0											
30	X	24.0											
31		24.0											
Total													
Average													
Maximum													

* Refer to the instructions for this report to determine which plants must provide this information
 DEP Form 62-555 900(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647
PWS Type: <input checked="checked" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477	Total Population Served at End of Month: 1,670
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaamerica.com	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4	Plant Telephone Number: (850) 773-2802
Plant Address: 1533 Cash Circle	City: Sunny Hills State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="checked" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C
Licensed Operators	Name License Class License Number Day(s) / Shift(s) Worked
Lead/Chief Operator: Jean H. Pitzer	C 7605 Days 1st Shift
Other Operators:	

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: April, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water	Minimum CT Required, mg-min/L	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0	111,000		0.7								0.4	
2	X	24.0	127,500		0.7								0.4	
3		24.0	127,500											
4	X	24.0	125,000		0.7								0.4	
5	X	24.0	143,000		0.7								0.4	
6	X	24.0	126,000		0.7								0.4	
7	X	24.0	139,000		0.7								0.3	
8	X	24.0	146,000		0.6								0.3	
9	X	24.0	104,500		0.5								0.3	
10		24.0	104,500											
11	X	24.0	186,000		0.6								0.4	
12	X	24.0	195,000		0.5								0.3	
13	X	24.0	107,000		0.5								0.3	
14	X	24.0	130,000		0.6								0.4	
15	X	24.0	130,000		0.5								0.3	
16	X	24.0	157,000		0.5								0.3	
17		24.0	157,000											
18	X	24.0	137,000		0.6								0.4	
19	X	24.0	145,000		0.6								0.4	
20	X	24.0	152,000		0.7								0.4	
21	X	24.0	161,000		0.6								0.3	
22	X	24.0	168,000		0.8								0.4	
23		24.0	101,500		0.5								0.3	
24	X	24.0	101,500											
25	X	24.0	170,000		0.5								0.3	
26	X	24.0	136,000		0.5								0.3	
27	X	24.0	100,000		0.5								0.3	
28	X	24.0	141,000		0.5								0.3	
29	X	24.0	200,000		0.5								0.3	
30	X	24.0	273,000		0.5								0.3	
31		24.0												
Total			4,302,000											
Average			138,774											
Maximum			273,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: April, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802		
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida	
		Zip Code: 32428		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer <i>Printed or Typed Name</i>	C7605 <i>License Number</i>
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: April, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1	X	24.0			0.6							0.3	
2	X	24.0	500		0.6							0.3	
3		24.0	500										
4	X	24.0	1,000		0.5							0.3	
5	X	24.0			0.6							0.3	
6	X	24.0	1,000		0.5							0.3	
7	X	24.0			0.5							0.3	
8	X	24.0	1,000		0.6							0.3	
9	X	24.0	500		0.6							0.4	
10		24.0	500										
11	X	24.0			0.6							0.4	
12	X	24.0	1,000		0.6							0.4	
13	X	24.0	1,000		0.6							0.3	
14	X	24.0			0.5							0.3	
15	X	24.0	1,000		0.5							0.3	
16	X	24.0	500		0.5							0.3	
17		24.0	500										
18	X	24.0	3,000		0.5							0.3	
19	X	24.0	4,000		0.4							0.3	
20	X	24.0	4,000		0.5							0.3	
21	X	24.0	3,000		0.5							0.3	
22	X	24.0	1,000		0.5							0.3	
23	X	24.0			0.5							0.3	
24		24.0											
25	X	24.0	1,000		0.5							0.3	
26	X	24.0	1,000		0.6							0.3	
27	X	24.0	1,000		0.6							0.3	
28	X	24.0	1,000		0.6							0.4	
29	X	24.0	333		0.6							0.3	
30	X	24.0	333										
31		24.0											
Total			28,667										
Average			925										
Maximum			4,000										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: May, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations					UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²			
1		24.0													
2	X	24.0													
3	X	24.0													
4	X	24.0													
5	X	24.0													
6	X	24.0													
7	X	24.0													
8		24.0													
9	X	24.0													
10	X	24.0													
11	X	24.0													
12	X	24.0													
13	X	24.0													
14	X	24.0													
15		24.0													
16	X	24.0													
17	X	24.0													
18	X	24.0													
19	X	24.0													
20	X	24.0													
21	X	24.0													
22		24.0													
23	X	24.0													
24	X	24.0													
25	X	24.0													
26	X	24.0													
27	X	24.0													
28	X	24.0													
29		24.0													
30	X	24.0													
31	X	24.0													
Total															
Average															
Maximum															

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802		
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: May, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1			24.0	136,000										
2	X		24.0	136,000		0.5							0.3	
3	X		24.0	113,000		0.7							0.4	
4	X		24.0	131,000		0.8							0.5	
5	X		24.0	120,000		0.8							0.5	
6	X		24.0	150,000		0.8							0.4	
7	X		24.0	152,000		0.8							0.4	
8			24.0	152,000										
9	X		24.0	104,000		0.8							0.3	
10	X		24.0	156,000		0.9							0.3	
11	X		24.0	206,000		0.9							0.4	
12	X		24.0	173,000		0.6							0.3	
13	X		24.0	217,000		0.6							0.3	
14	X		24.0	122,500		0.7							0.3	
15			24.0	122,500										
16	X		24.0	121,000		0.8							0.4	
17	X		24.0	162,000		0.9							0.4	
18	X		24.0	244,000		0.6							0.3	
19	X		24.0	149,000		0.7							0.3	
20	X		24.0	99,000		0.7							0.3	
21	X		24.0	184,000		0.6							0.3	
22			24.0	184,000										
23	X		24.0	182,000		0.5							0.2	
24	X		24.0	206,000		0.9							0.4	
25	X		24.0	206,000		0.7							0.4	
26	X		24.0	267,000		5.0							0.3	
27	X		24.0	183,000		0.9							0.4	
28	X		24.0	134,000		0.7							0.3	
29			24.0	134,000										
30	X		24.0	138,000		0.6							0.3	
31	X		24.0	162,000										
Total				4,946,000										
Average				159,548										
Maximum				267,000										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: May, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: May, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0	1,000										
2	X	24.0	1,000		0.6								0.3
3	X	24.0			0.6								0.3
4	X	24.0			0.5								0.3
5	X	24.0	1,000		0.5								0.3
6	X	24.0			0.6								0.4
7	X	24.0	1,000		0.6								0.4
8		24.0	1,000										
9	X	24.0	2,000		0.6								0.4
10	X	24.0			0.6								0.5
11	X	24.0	1,000		0.6								0.5
12	X	24.0	1,000		0.7								0.5
13	X	24.0	1,000		0.7								0.4
14	X	24.0	500		0.7								0.4
15		24.0	500										
16	X	24.0	1,000		0.7								0.5
17	X	24.0	1,000		0.7								0.5
18	X	24.0	1,000		0.7								0.4
19	X	24.0			0.7								0.4
20	X	24.0	1,000		0.6								0.3
21	X	24.0			0.5								0.3
22		24.0											
23	X	24.0	1,000		0.5								0.3
24	X	24.0			0.5								0.3
25	X	24.0	1,000		0.5								0.3
26	X	24.0			0.5								0.3
27	X	24.0	1,000		0.5								0.3
28	X	24.0	1,500		0.5								0.3
29		24.0	1,500										
30	X	24.0	2,000		0.5								0.3
31	X	24.0	1,000										
Total			24,000										
Average			774										
Maximum			2,000										

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			Day(s)/Shift(s) Worked
			Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: June, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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) Measurement (T) at C Contact Time	Disinfectant Provided Before or at First Customer	Temp. of Water, °C	pH of Water, If Applicable	Minimum CT Required, mg·min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Total		
													Average	Maximum	
1	X	24.0												31	24.0
2	X	24.0												30	24.0
3	X	24.0												29	24.0
4	X	24.0												28	24.0
5	X	24.0												27	24.0
6	X	24.0												26	24.0
7	X	24.0												25	24.0
8	X	24.0												24	24.0
9	X	24.0												23	24.0
10	X	24.0												22	24.0
11	X	24.0												21	24.0
12	X	24.0												20	24.0
13	X	24.0												19	24.0
14	X	24.0												18	24.0
15	X	24.0												17	24.0
16	X	24.0												16	24.0
17	X	24.0												15	24.0
18	X	24.0												14	24.0
19	X	24.0												13	24.0
20	X	24.0												12	24.0
21	X	24.0												11	24.0
22	X	24.0												10	24.0
23	X	24.0												9	24.0
24	X	24.0												8	24.0
25	X	24.0												7	24.0
26	X	24.0												6	24.0
27	X	24.0												5	24.0
28	X	24.0												4	24.0
29	X	24.0												3	24.0
30	X	24.0												2	24.0
31	X	24.0												1	24.0

* Refer to the instructions for this report to determine which plants must provide this information.

DEP Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802			
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida		
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water					
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators		Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer		C	7605	Days 1st Shift
Other Operators:					

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date

Jean Pitzer

Printed or Typed Name

C7605

License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: June, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Started 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 Measurement Point During Peak Flow, mg/L		Lowest CT Disinfectant Provided Before or at First Customer Peak Flow, mg-minutes		Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remove Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Lowest Residual Disinfectant Concentration (C) Before or at First Measurement Point During Peak Flow, mg/L	Customer Peak Flow, mg-minutes	Lowest CT Disinfectant Provided Before or at First Customer Peak Flow, mg-minutes	Lowest UV Dose, mW-sec/cm ²							

Day of the Month	Peak Flow Rate, gpd.	Customer Peak Flow, mg/L	Lowest Residual Disinfectant Concentration (C) Before or at First Measurement Point During Peak Flow, mg/L	Customer Peak Flow, mg-minutes	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remove Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	130,000	0.8						0.4	
2	X	24.0	145,000	0.8						0.4	
3	X	24.0	125,000	0.6						0.3	
4	X	24.0	141,000	0.6						0.3	
5		24.0	141,000								
6	X	24.0	130,000	0.6						0.3	
7	X	24.0	205,000	0.6						0.3	
8	X	24.0	195,000	0.7						0.4	
9	X	24.0	164,000	0.8						0.4	
10	X	24.0	145,000	0.8						0.5	
11	X	24.0	400,000	0.7						0.4	
12		24.0	400,000								
13	X	24.0	132,000	0.8						0.4	
14	X	24.0	147,000	0.8						0.4	
15	X	24.0	180,000	0.8						0.4	
16	X	24.0	256,000	0.7						0.3	
17	X	24.0	349,000	0.8						0.4	
18	X	24.0	75,000	0.7						0.4	
19		24.0	75,000								
20	X	24.0	225,000	0.5						0.3	
21	X	24.0	240,000	0.5						0.3	
22	X	24.0	128,000	0.5						0.3	
23	X	24.0	130,000	0.5						0.3	
24	X	24.0	122,000	0.5						0.3	
25	X	24.0	320,000	0.6						0.3	
26		24.0	320,000								
27	X	24.0	212,000	0.5						0.2	
28	X	24.0	164,000	0.5						0.3	
29	X	24.0	147,000	0.7						0.4	
30	X	24.0	217,000	0.7						0.4	
31		24.0									
Total		5,760,000									
Average		185,806									
Maximum		400,000									

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: June, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	477			Total Population Served at End of Month:	1,670
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5			Plant Telephone Number:	(850) 773-2802	
Plant Address:	1240 Elkcam Blvd.	City:	Sunny Hills	State:	Florida	
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift		
Other Operators:						

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: _____ Printed or Typed Name: Jean Pitzer License Number: C7605

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: June, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	3,000		0.6								0.3	
2	X	24.0	2,000		0.5								0.3	
3	X	24.0	4,000		0.6								0.3	
4	X	24.0	1,000		0.6								0.3	
5		24.0	1,000											
6	X	24.0	4,000		0.6								0.3	
7	X	24.0	5,000		0.5								0.3	
8	X	24.0	4,000		0.5								0.3	
9	X	24.0	2,000		0.5								0.3	
10	X	24.0	4,000		0.5								0.3	
11	X	24.0	500		0.5								0.3	
12		24.0	500											
13	X	24.0	2,000		0.5								0.3	
14	X	24.0	3,000		0.5								0.3	
15	X	24.0	2,000		0.6								0.3	
16	X	24.0	1,000		0.6								0.3	
17	X	24.0	1,000		0.5								0.3	
18	X	24.0	1,000		0.5								0.3	
19		24.0	1,000											
20	X	24.0	1,000		0.5								0.3	
21	X	24.0	1,000		0.5								0.3	
22	X	24.0	1,000		0.5								0.3	
23	X	24.0	2,000		0.5								0.3	
24	X	24.0	2,000		0.5								0.3	
25	X	24.0			0.5								0.3	
26		24.0												
27	X	24.0	2,000		0.5								0.5	
28	X	24.0	6,000		0.5								0.3	
29	X	24.0	1,000		0.5								0.3	
30	X	24.0	2,000		0.5								0.3	
31		24.0												
Total			60,000											
Average			1,935											
Maximum			6,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	477	Total Population Served at End of Month:	1,670
PWS Owner: Aqua Utilities Florida			
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City: Leesburg	State: Florida Zip Code: 34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida Zip Code: 32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		
Permitted Maximum Day Operating Capacity of Plant, gallons per day:		1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.):		V	
Plant Class (per subsection 62-699.310(4), F.A.C.):		C	

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PWS'S TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1 July, 2005

III. Daily Data for the Month/Year of: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation
 Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	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 Measurement Point During Peak Flow	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at First Measurement Point During Peak Flow	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg·min/L	Lowest Operating UV Dose, mW·sec/cm ²	Remote Point in Distribution System, mg/L	CT Calculations, if Applicable*	
													UV Dose	UV Dose
1	X													
2	X													
3														
4	X													
5	X													
6	X													
7	X													
8	X													
9	X													
10														
11	X													
12	X													
13	X													
14	X													
15	X													
16	X													
17														
18	X													
19	X													
20	X													
21	X													
22	X													
23	X													
24														
25	X													
26	X													
27	X													
28	X													
29	X													
30	X													
31														
Total														
Average														
Maximum														

* Refer to the instructions for this report to determine which plants must provide this information.

DEF Form 62-555 900(3) Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
		Zip Code: 34749	
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
		Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number 1670647 Plant Name: Sunny Hills Well # 4 July, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostatate Four-Log Virus Inactivation, if Applicable*
 UV Dose

Days Plant Started or Visited by Operator	Hours plant in Operation	Net Quantity of Finished Water Produced, gal	Peak Flow Rate, gpd	Lowest Residual Disinfectant Contact Time	Disinfectant Before or at First Customer Measurement (T) at C	Peak Flow, mg/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg·min/L	UV Dose, mW-sec/cm ²	Lowest UV Dose Required, mW·sec/cm ²	Minimum Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	230,000	0.6									
2	X	24.0	219,500	0.7									
3		24.0	219,500										
4	X	24.0	105,000	0.7									
5	X	24.0	150,000	0.6									
6	X	24.0	154,000	0.6									
7	X	24.0	159,000	0.6									
8	X	24.0	178,000	0.6									
9	X	24.0	145,500	0.7									
10		24.0	145,500										
11	X	24.0	153,000	0.8									
12	X	24.0	161,000	8.0									
13	X	24.0	135,000	0.7									
14	X	24.0	177,000	0.7									
15	X	24.0	128,000	0.7									
16	X	24.0	168,000	0.7									
17		24.0	168,000										
18	X	24.0	121,000	0.8									
19	X	24.0	167,000	0.8									
20	X	24.0	151,000	0.8									
21	X	24.0	199,000	0.8									
22	X	24.0	196,000	0.6									
23	X	24.0	205,000	0.6									
24		24.0	205,000										
25	X	24.0	232,000	0.6									
26	X	24.0	131,000	0.8									
27	X	24.0	297,000	0.8									
28	X	24.0	222,000	0.6									
29	X	24.0	259,000	0.7									
30	X	24.0	238,000	0.6									
31		24.0	238,000										
Total			5,657,000										
Average			182,484										
Maximum			297,000										

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: July, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647	
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	477			Total Population Served at End of Month:	1,670	
PWS Owner:	Aqua Utilities Florida					
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager	
Contact Person's Mailing Address:	PO Box 490310		City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333	
Contact Person's E-Mail Address:	beheath@aquaaamerica.com					

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 5			Plant Telephone Number:	(850) 773-2802	
Plant Address:	1240 Elkcam Blvd.		City:	Sunny Hills	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked		
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift		
Other Operators:						

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

_____ Signature and Date	Jean Pitzer _____ Printed or Typed Name	C7605 _____ License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: July, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	10,000		0.5								0.3	
2	X	24.0	3,000		0.6								0.4	
3		24.0	3,000											
4	X	24.0			0.5								0.3	
5	X	24.0	1,000		0.5								0.3	
6	X	24.0	1,000		0.5								0.2	
7	X	24.0			0.5								0.3	
8	X	24.0	1,000		0.6								0.3	
9	X	24.0	500		0.5								0.3	
10		24.0	500											
11	X	24.0	1,000		0.6								0.4	
12	X	24.0			0.6								0.4	
13	X	24.0	1,000		0.6								0.4	
14	X	24.0			0.5								0.3	
15	X	24.0	1,000		0.5								0.3	
16	X	24.0	500		0.5								0.3	
17		24.0	500											
18	X	24.0	1,000		0.6								0.3	
19	X	24.0			0.6								0.4	
20	X	24.0			0.6								0.4	
21	X	24.0	1,000		0.5								0.3	
22	X	24.0			0.6								0.3	
23	X	24.0	500		0.4								0.3	
24		24.0	500											
25	X	24.0			0.5								0.3	
26	X	24.0	2,000		0.5								0.3	
27	X	24.0	1,000		0.4								0.2	
28	X	24.0	4,000		0.9								0.4	
29	X	24.0	6,000		0.8								0.3	
30	X	24.0	4,000		0.6								0.2	
31		24.0	4,000											
Total			48,000											
Average			1,548											
Maximum			10,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills			PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive				
Number of Service Connections at End of Month: 477			Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida				
Contact Person: Brian Heath			Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310			City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980			Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com				

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1			Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.			City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V			Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Jean Pitzer	C7605
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: August, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				CT Calculations				UV Dose					
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1	X	24.0											
2	X	24.0											
3	X	24.0											
4	X	24.0											
5	X	24.0											
6	X	24.0											
7		24.0											
8	X	24.0											
9	X	24.0											
10	X	24.0											
11	X	24.0											
12	X	24.0											
13	X	24.0											
14		24.0											
15	X	24.0											
16	X	24.0											
17	X	24.0											
18	X	24.0											
19	X	24.0											
20	X	24.0											
21		24.0											
22	X	24.0											
23	X	24.0											
24	X	24.0											
25	X	24.0											
26	X	24.0											
27	X	24.0											
28		24.0											
29	X	24.0											
30	X	24.0											
31	X	24.0											
Total													
Average													
Maximum													

* Refer to the instructions for this report to determine which plants must provide this information.
 DEP Form 62-555.900(3)Alternate

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills	PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month:	477	Total Population Served at End of Month:	1,670
PWS Owner:	Aqua Utilities Florida		
Contact Person:	Brian Heath	Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg
		State:	Florida
		Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980	Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com		

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 4	Plant Telephone Number:	(850) 773-2802
Plant Address:	1533 Cash Circle	City:	Sunny Hills
		State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	Zip Code:	32428
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000		
Plant Category (per subsection 62-699.310(4), F.A.C.):	V	Plant Class (per subsection 62-699.310(4), F.A.C.):	C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	<u>Jean Pitzer</u> Printed or Typed Name	<u>C7605</u> License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: August, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation.	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	312,000		0.8								0.4	
2	X	24.0	270,000		0.8								0.4	
3	X	24.0	263,000		0.7								0.4	
4	X	24.0	243,000		0.9								0.4	
5	X	24.0	195,000		0.9								0.4	
6	X	24.0	175,500		0.9								0.4	
7		24.0	175,500											
8	X	24.0	201,000		0.9								0.4	
9	X	24.0	248,000		0.8								0.4	
10	X	24.0	200,000		0.8								0.4	
11	X	24.0	233,000		0.8								0.4	
12	X	24.0	256,000		0.8								0.4	
13	X	24.0	74,000		0.7								0.3	
14	X	24.0	191,000		0.7								0.3	
15	X	24.0	215,000		0.6								0.3	
16	X	24.0	166,000		0.8								0.4	
17	X	24.0	165,000		0.7								0.4	
18	X	24.0	170,000		0.7								0.4	
19	X	24.0	170,000		0.7								0.4	
20	X	24.0	202,000		0.7								0.4	
21		24.0	202,000											
22	X	24.0	250,000		0.8								0.4	
23	X	24.0	134,000		0.8								0.4	
24	X	24.0	190,000		0.7								0.4	
25	X	24.0	257,000		0.7								0.3	
26	X	24.0	258,000		0.7								0.3	
27	X	24.0	123,500		0.7								0.3	
28		24.0	123,500											
29	X	24.0	194,000		0.6								0.3	
30	X	24.0	183,000		0.6								0.3	
31	X	24.0	178,000											
Total			6,218,000											
Average			200,581											
Maximum			312,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: August, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 477	Total Population Served at End of Month: 1,670
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquamerica.com	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5	Plant Telephone Number: (850) 773-2802			
Plant Address: 1240 Elkcam Blvd.	City: Sunny Hills State: Florida Zip Code: 32428			
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

_____ Signature and Date	Jean Pitzer _____ Printed or Typed Name	C7605 _____ License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: August, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0			0.8								0.4	
2	X	24.0			0.8								0.4	
3	X	24.0	1,000		0.8								0.3	
4	X	24.0	1,000		0.6								0.3	
5	X	24.0	1,000		0.8								0.4	
6	X	24.0	500		0.7								0.4	
7		24.0	500											
8	X	24.0			0.8								0.4	
9	X	24.0	1,000		0.8								0.4	
10	X	24.0			0.7								0.4	
11	X	24.0	1,000		0.7								0.4	
12	X	24.0			0.7								0.4	
13	X	24.0	500		0.7								0.4	
14		24.0	500											
15	X	24.0	1,000		0.6								0.4	
16	X	24.0			0.8								0.4	
17	X	24.0	1,000		0.8								0.4	
18	X	24.0	1,000		0.7								0.4	
19	X	24.0	1,000		0.6								0.3	
20	X	24.0			0.6								0.3	
21		24.0												
22	X	24.0	1,000		0.5								0.2	
23	X	24.0			0.6								0.3	
24	X	24.0	1,000		0.6								0.3	
25	X	24.0	1,000		0.7								0.3	
26	X	24.0			0.9								0.4	
27	X	24.0	500		0.9								0.1	
28		24.0	500											
29	X	24.0	2,000		0.8								0.4	
30	X	24.0			0.8								0.4	
31	X	24.0												
Total			17,000											
Average			548											
Maximum			2,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Jean Pitzer	C7605
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/Year of: September, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*													
Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations						UV Dose		Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²		
1		24.0											
2		24.0											
3		24.0											
4		24.0											
5		24.0											
6		24.0											
7		24.0											
8		24.0											
9		24.0											
10		24.0											
11		24.0											
12		24.0											
13		24.0											
14		24.0											
15		24.0											
16		24.0											
17		24.0											
18		24.0											
19		24.0											
20		24.0											
21		24.0											
22		24.0											
23		24.0											
24		24.0											
25		24.0											
26		24.0											
27		24.0											
28		24.0											
29		24.0											
30		24.0											
31		24.0											
Total													
Average													
Maximum													

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type:	<input checked="checked" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802			
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida		
Type of Water Treatment by Plant: <input checked="checked" type="checkbox"/> Raw Ground Water		<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000					
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators		Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer		C	7605	Days 1st Shift
Other Operators:					

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

	Jean Pitzer	C7605
Signature and Date	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: September, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Temp of Water, °C			pH of Water, if Applicable
1	X	24.0	210,000		0.9								0.5	
2	X	24.0	110,000		0.8								0.4	
3	X	24.0	199,000		0.8								0.4	
4		24.0	199,000											
5	X	24.0	224,000		0.8								0.4	
6	X	24.0	203,000		0.7								0.3	
7	X	24.0	207,000		0.7								0.3	
8	X	24.0	235,000		0.8								0.3	
9	X	24.0	203,000		0.8								0.4	
10	X	24.0	211,000		0.7								0.3	
11		24.0	211,000											
12	X	24.0	252,000		0.7								0.3	
13	X	24.0	200,000		0.7								0.3	
14	X	24.0	256,000		0.7								0.3	
15	X	24.0	245,000		0.7								0.3	
16	X	24.0	235,000		0.6								0.3	
17	X	24.0	229,500		0.6								0.3	
18		24.0	229,500											
19	X	24.0	273,000		0.5								0.2	
20	X	24.0	354,000		0.5								0.2	
21	X	24.0	235,000		0.6								0.3	
22	X	24.0	274,000		0.6								0.3	
23	X	24.0	120,000		0.8								0.4	
24	X	24.0	220,000		0.8								0.4	
25		24.0	220,000											
26	X	24.0	99,000		0.8								0.4	
27	X	24.0	175,000		0.8								0.4	
28	X	24.0	166,000		0.7								0.4	
29	X	24.0	190,000		0.7								0.4	
30	X	24.0	152,000		0.7								0.3	
31		24.0												
Total			6,337,000											
Average			204,419											
Maximum			354,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: September, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 477		Total Population Served at End of Month: 1,670	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date _____	Jean Pitzer _____ Printed or Typed Name	C7605 _____ License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/year of: September, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Month	Day of the (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	Disinfectant Contact Time Before or at First Customer	Disinfectant Provided	Temp of Water, °C If Applicable	pH of Water	Minimum CT Required, mg·min/L	Operating UV Dose, mW-sec/cm	Lowest UV Dose Required, mW-sec/cm	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Days Plant Staffed or Visited by Operator	Start of Operation	End of Operation	Average	Maximum	Total		
																			18,000	581	2,000
31	X																			24.0	
30	X																			24.0	
29	X																			24.0	
28	X																			24.0	
27	X																			24.0	
26	X																			24.0	1,000
25																				24.0	1,000
24	X																			24.0	1,000
23	X																			24.0	
22	X																			24.0	1,000
21	X																			24.0	
20	X																			24.0	1,000
19	X																			24.0	1,000
18																				24.0	500
17	X																			24.0	500
16	X																			24.0	
15	X																			24.0	2,000
14	X																			24.0	2,000
13	X																			24.0	
12	X																			24.0	1,000
11																				24.0	500
10	X																			24.0	500
9	X																			24.0	1,000
8	X																			24.0	
7	X																			24.0	1,000
6	X																			24.0	
5	X																			24.0	1,000
4																				24.0	500
3	X																			24.0	500
2	X																			24.0	1,000
1	X																			24.0	0.5

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 499		Total Population Served at End of Month: 1,747	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802		
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428		
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Plant Category (per subsection 62-699.310(4), F.A.C.): V				
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 | Plant Name: Sunny Hills Well # 1 | October, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Part Staffed or Visted 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 Measurement Point During Peak Flow, mg/L.	Disinfectant Contact Time (T) at C	Lowest CT Provided Before or at Customer First	Customer During Peak Flow, mg-min/L.	Temp of Water, °C.	pH of Water, if Applicable	Minimum CT Required, mg-min/L.	Lowest UV Dose, mW-sec/cm ² .	Minimum UV Dose Required, mW-sec/cm ² .	Remote Point in Distribution System, mg/L.	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
																UV Dose	UV Dose
																Well # 1 is still out of service.	
1	X																
2																	
3	X																
4	X																
5	X	443,000															
6	X	443,000															
7	X	443,000															
8	X	443,000															
9		443,000															
10	X	443,000															
11	X	443,000															
12	X	443,000															
13	X	2,000															
14	X	33,500															
15	X	33,500															
16		33,500															
17	X	928,000															
18	X	928,000															
19	X	157,000															
20		157,000															
21		157,000															
22	X																
23																	
24	X																
25	X																
26	X																
27	X																
28	X																
29	X																
30																	
31	X																

Total: 5,940,000
 Average: 191,613
 Maximum: 928,000

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 499		Total Population Served at End of Month: 1,747	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Contact Person's Fax Number: (352) 787-6333	
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4		Plant Telephone Number: (850) 773-2802	
Plant Address: 1533 Cash Circle		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605 Days 1st Shift
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: October, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²			Minimum UV Dose Required, mW-sec/cm ²
1	X	24.0	181,500		0.7								0.3	
2		24.0	181,500											
3	X	24.0	230,000		0.7								0.3	
4	X	24.0	110,000		0.6								0.3	
5	X	24.0	179,000		0.9								0.5	
6	X	24.0	161,000		0.9								0.5	
7	X	24.0	185,000		0.9								0.5	
8	X	24.0	167,500		0.9								0.5	
9		24.0	167,500											
10	X	24.0	246,000		0.9								0.4	
11	X	24.0	219,000		0.8								0.3	
12	X	24.0	155,000		0.8								0.4	
13	X	24.0	271,000		0.7								0.3	
14	X	24.0	203,000		0.8								0.3	
15	X	24.0	143,500		0.8								0.3	
16		24.0	143,500											
17	X	24.0	282,000		0.8								0.4	
18	X	24.0	181,000		0.8								0.4	
19	X	24.0	146,000		0.8								0.4	
20	X	24.0	261,000		0.8								0.4	
21	X	24.0	178,000		0.8								0.3	
22	X	24.0	223,500		0.8								0.3	
23		24.0	223,500											
24	X	24.0	151,000		0.8								0.4	
25	X	24.0	205,000		0.8								0.4	
26	X	24.0	233,000		0.7								0.4	
27	X	24.0	175,000		0.8								0.4	
28	X	24.0	160,000		0.8								0.4	
29	X	24.0	215,500		0.7								0.3	
30		24.0	215,500											
31	X	24.0	218,000											
Total			6,012,000											
Average			193,935											
Maximum			282,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: October, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community		<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month: 499		Total Population Served at End of Month: 1,747	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5		Plant Telephone Number: (850) 773-2802	
Plant Address: 1240 Elkcam Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Plant Category (per subsection 62-699.310(4), F.A.C.): V			
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer	C7605
	Printed or Typed Name	License Number

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 | Plant Name: Sunny Hills Well # 5 | October, 2005

III. Daily Data for the Month/year of:

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

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	Disinfectant Contact Time (T) at C	First Customer During Peak Flow, minutes	Lowest CT	CT Calculations				Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
								CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*											
1	X	24.0	1,000	0.8													0.4		
2		24.0	1,000																
3	X	24.0	1,000	0.8															
4	X	24.0	2,000	0.7															
5	X	24.0	24.0	0.7															
6	X	24.0	1,000	0.6															
7	X	24.0	24.0	0.5															
8	X	24.0	24.0	0.5															
9		24.0																	
10	X	24.0	1,000	0.5															
11	X	24.0	1,000	0.5															
12	X	24.0	1,000	0.6															
13	X	24.0	2,000	0.7															
14	X	24.0	1,000	0.6															
15	X	24.0		0.7															
16		24.0																	
17	X	24.0	1,000	0.8															
18	X	24.0	24.0	0.8															
19	X	24.0	1,000	0.8															
20	X	24.0	1,000	0.8															
21	X	24.0	1,000	0.8															
22	X	24.0	500	0.8															
23		24.0	500																
24	X	24.0	1,000	0.8															
25	X	24.0	1,000	0.7															
26	X	24.0	1,000	0.7															
27	X	24.0	1,000	0.7															
28	X	24.0	1,000	0.6															
29	X	24.0	500	0.8															
30		24.0	500																
31	X	24.0																	
Total			22,000																
Average			710																
Maximum			2,000																

* Refer to the instructions for this report to determine which plants must provide this information.

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills		PWS Identification Number: 1670647	
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 499		Total Population Served at End of Month: 1,747	
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath		Contact Person's Title: Area Manager	
Contact Person's Mailing Address: PO Box 490310		City: Leesburg	State: Florida
Contact Person's Telephone Number: (352) 787-0980		Zip Code: 34749	
Contact Person's E-Mail Address: beheath@aquaaamerica.com		Contact Person's Fax Number: (352) 787-6333	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 1		Plant Telephone Number: (850) 773-2802	
Plant Address: 3810 Gables Blvd.		City: Sunny Hills	State: Florida
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water		Zip Code: 32428	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V		Plant Class (per subsection 62-699.310(4), F.A.C.): C	
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: _____ Printed or Typed Name: Jean Pitzer License Number: C7605

MONTHLY OPERATION REPORT FOR PW'SS TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/year of: November, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	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 Provided Before or at First Measurement (T) at C	Disinfectant Concentration (C) Before or at First Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Measurement (T) at C	Lowest CT During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions: Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	Total	Average	Maximum
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		
13																		
14																		
15																		
16																		
17																		
18																		
19																		
20																		
21																		
22																		
23																		
24																		
25																		
26																		
27																		
28																		
29																		
30																		
31																		

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive	
Number of Service Connections at End of Month:	499			Total Population Served at End of Month:	1,747
PWS Owner:	Aqua Utilities Florida				
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager
Contact Person's Mailing Address:	PO Box 490310	City:	Leesburg	State:	Florida
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333
Contact Person's E-Mail Address:	beheath@aquaaamerica.com				

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 4			Plant Telephone Number:	(850) 773-2802
Plant Address:	1533 Cash Circle	City:	Sunny Hills	State:	Florida
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water	<input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked	
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift	
Other Operators:					

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: _____ Printed or Typed Name: Jean Pitzer License Number: C7605

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/year of: November, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator in the (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 Measurement (T) at C	Disinfectant Contact Time Before or at First Customer Measurement	Flow, mg-min./L. During Peak	Temp of Water, °C If Applicable	pH of Water	Minimum CT Required, mg-min./L.	Lowest UV Dose, mW-sec/cm ²	UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*	
													UV Dose	CT
1	X	170,000	24.0	0.5									0.2	
2	X	170,000	24.0	0.5									0.2	
3	X	164,000	24.0	0.8									0.4	
4	X	205,000	24.0	0.7									0.4	
5	X	175,000	24.0	0.7									0.4	
6		175,000	24.0											
7	X	223,000	24.0	0.8									0.4	
8	X	143,000	24.0	0.7									0.4	
9	X	174,000	24.0	0.8									0.4	
10	X	179,000	24.0	0.8									0.4	
11	X	166,000	24.0	0.7									0.3	
12	X	185,500	24.0	0.7									0.3	
13		185,500	24.0											
14	X	167,000	24.0	0.5									0.2	
15	X	180,000	24.0	0.5									0.2	
16	X	296,000	24.0	0.5									0.2	
17	X	96,000	24.0	0.6									0.3	
18	X	117,000	24.0	0.6									0.3	
19	X	153,500	24.0	0.6									0.3	
20		153,500	24.0											
21	X	135,000	24.0	0.5									0.2	
22	X	180,000	24.0	0.8									0.4	
23	X	223,000	24.0	0.8									0.4	
24	X	130,000	24.0	0.8									0.4	
25	X	122,500	24.0	0.9									0.5	
26		122,500	24.0											
27	X	100,000	24.0	0.9									0.4	
28	X	114,000	24.0	0.9									0.4	
29	X	127,000	24.0	0.9									0.3	
30	X	120,000	24.0	0.9									0.4	
31		120,000	24.0											
Total		4,852,000												
Average		156,516												
Maximum		296,000												

* Refer to the instructions for this report to determine which plants must provide this information

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



See Pages 4 for Instructions.

I. General Information for the Month/Year of: November, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive
Number of Service Connections at End of Month: 499	Total Population Served at End of Month: 1,747
PWS Owner: Aqua Utilities Florida	
Contact Person: Brian Heath	Contact Person's Title: Area Manager
Contact Person's Mailing Address: PO Box 490310	City: Leesburg State: Florida Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333
Contact Person's E-Mail Address: beheath@aquaamerica.com	

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5	Plant Telephone Number: (850) 773-2802
Plant Address: 1240 Elkcam Blvd.	City: Sunny Hills State: Florida Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water	
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000	
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C

Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5
 November, 2005

III. Daily Data for the Month/Year of:
 Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):
 Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	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	Point During Measurement (T) at C	Customer First Disinfectant Provided Before or at Lowest CT	Flow, mg-min/L During Peak	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Operating UV Dose, mW-sec/cm ²	Required UV Dose, mW-sec/cm ²	System, mg/L	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		
															Lowest Residual Disinfectant Concentration at	Required UV Dose	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation
1	X	24.0	24.0		0.8									0.4			
2	X	24.0	1,000		0.8									0.4			
3	X	24.0			0.8									0.4			
4	X	24.0			0.8									0.4			
5	X	24.0	500		0.8									0.4			
6		24.0															
7	X	24.0	24.0		0.8									0.4			
8	X	24.0	1,000		0.7									0.3			
9	X	24.0	1,000		0.7									0.3			
10	X	24.0	1,000		0.6									0.2			
11	X	24.0	1,000		0.7									0.3			
12	X	24.0	500		0.8									0.3			
13		24.0	500														
14	X	24.0			0.6									0.2			
15	X	24.0			0.5									0.2			
16	X	24.0	1,000		0.6									0.2			
17	X	24.0			0.7									0.3			
18	X	24.0			0.8									0.4			
19	X	24.0	500		0.8									0.4			
20		24.0	500														
21	X	24.0	2,000		0.8									0.4			
22	X	24.0			0.8									0.4			
23	X	24.0			0.8									0.4			
24	X	24.0	500		0.8									0.4			
25		24.0	500														
26	X	24.0			0.8									0.3			
27	X	24.0	2,000		0.8									0.4			
28	X	24.0	1,000		0.8									0.4			
29	X	24.0			0.8									0.3			
30	X	24.0			0.8									0.4			
31		24.0															
			Total		15,000												
			Average		484												
			Maximum		2,000												

* Refer to the instructions for this report to determine which plants must provide this information

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2005

A. Public Water System (PWS) Information

PWS Name:	Sunny Hills			PWS Identification Number:	1670647		
PWS Type:	<input checked="" type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month:	499			Total Population Served at End of Month:	1,747		
PWS Owner:	Aqua Utilities Florida						
Contact Person:	Brian Heath			Contact Person's Title:	Area Manager		
Contact Person's Mailing Address:	PO Box 490310	City:	Lcsburg	State:	Florida	Zip Code:	34749
Contact Person's Telephone Number:	(352) 787-0980			Contact Person's Fax Number:	(352) 787-6333		
Contact Person's E-Mail Address:	beheath@aquaamerica.com						

B. Water Treatment Plant Information

Plant Name:	Sunny Hills Well # 1			Plant Telephone Number:	(850) 773-2802		
Plant Address:	3810 Gables Blvd.			City:	Sunny Hills	Zip Code:	32428
Type of Water Treatment by Plant:	<input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water						
Permitted Maximum Day Operating Capacity of Plant, gallons per day:	1,224,000						
Plant Category (per subsection 62-699.310(4), F.A.C.):	V			Plant Class (per subsection 62-699.310(4), F.A.C.):	C		
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked			
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift			
Other Operators:							

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date	Jean Pitzer Printed or Typed Name	C7605 License Number
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MONTHLY OPERATION REPORT FOR PWSs TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 1

III. Daily Data for the Month/year of: December, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines) Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Days Plant Staffed or Visited by Operator (Place "X")	Hours Plant Operation in	Net Quantity of Finished Water Produced, gal.	Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer Measurement Point During Peak Flow, mg/L	Disinfectant Contact Time Before or at First Customer Measurement Point During Peak Flow, minutes	Lowest CT	Temp of Water, °C if Applicable	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*		UV Dose	
														CT Calculations	UV Dose	CT Calculations	UV Dose
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
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22																	
23																	
24																	
25																	
26																	
27																	
28																	
29																	
30																	
31																	
Total																	
Average																	
Maximum																	

* Refer to the instructions for this report to determine which plants must provide this information

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Consecutive		
Number of Service Connections at End of Month: 499	Total Population Served at End of Month: 1,747		
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath	Contact Person's Title: Area Manager		
Contact Person's Mailing Address: PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333		
Contact Person's E-Mail Address: beheath@aguaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 4	Plant Telephone Number: (850) 773-2802		
Plant Address: 1533 Cash Circle	City: Sunny Hills	State: Florida	Zip Code: 32428
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C		
Licensed Operators	Name	License Class	License Number
Lead/Chief Operator:	Jean H. Pitzer	C	7605
Other Operators:			Days 1st Shift

II. Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date _____ Printed or Typed Name Jean Pitzer License Number C7605

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 4

III. Daily Data for the Month/Year of: December, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demstrate Four-Log Virus Inactivation, if Applicable*								Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions, Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations				UV Dose						
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²	Temp of Water, °C			pH of Water, if Applicable
1	X	24.0	172,000		0.9								0.4	
2	X	24.0	175,000		0.9								0.4	
3	X	24.0	116,000		0.9								0.4	
4		24.0	116,000											
5	X	24.0	208,000		1.0								4.0	
6	X	24.0	133,000		1.0								0.4	
7	X	24.0	181,000		0.8								0.3	
8	X	24.0	73,000		0.5								0.2	
9	X	24.0	153,000		0.6								0.3	
10	X	24.0	137,500		0.7								0.4	
11		24.0	137,500											
12	X	24.0	90,000		0.8								0.4	
13	X	24.0	124,000		0.8								0.4	
14	X	24.0	139,000		0.6								0.3	
15	X	24.0	130,000		0.6								0.3	
16	X	24.0	227,000		0.6								0.3	
17	X	24.0	111,500		0.6								0.3	
18		24.0	111,500											
19	X	24.0	150,000		0.6								0.3	
20	X	24.0	159,000		0.6								0.3	
21	X	24.0	146,000		0.8								0.4	
22	X	24.0	152,000		0.8								0.4	
23	X	24.0	161,000		0.8								0.4	
24	X	24.0	169,500		0.8								0.4	
25		24.0	169,500											
26	X	24.0	115,000		0.8								0.4	
27	X	24.0	160,000		0.8								0.4	
28	X	24.0	145,000		0.8								0.4	
29	X	24.0	171,000		0.6								0.3	
30	X	24.0	174,000		0.8								0.4	
31	X	24.0	157,000											
Total			4,564,000											
Average			147,226											
Maximum			227,000											

* Refer to the instructions for this report to determine which plants must provide this information.

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



Polymer Page 3 Due in December

See Pages 4 for Instructions.

I. General Information for the Month/Year of: December, 2005

A. Public Water System (PWS) Information

PWS Name: Sunny Hills	PWS Identification Number: 1670647		
PWS Type: <input checked="" type="checkbox"/> Community <input type="checkbox"/> Non-Transient Non-Community <input type="checkbox"/> Transient Non-Community <input type="checkbox"/> Consecutive			
Number of Service Connections at End of Month: 499	Total Population Served at End of Month: 1,747		
PWS Owner: Aqua Utilities Florida			
Contact Person: Brian Heath	Contact Person's Title: Area Manager		
Contact Person's Mailing Address: PO Box 490310	City: Leesburg	State: Florida	Zip Code: 34749
Contact Person's Telephone Number: (352) 787-0980	Contact Person's Fax Number: (352) 787-6333		
Contact Person's E-Mail Address: beheath@aquaaamerica.com			

B. Water Treatment Plant Information

Plant Name: Sunny Hills Well # 5	Plant Telephone Number: (850) 773-2802			
Plant Address: 1240 Elkcam Blvd.	City: Sunny Hills	State: Florida	Zip Code: 32428	
Type of Water Treatment by Plant: <input checked="" type="checkbox"/> Raw Ground Water <input type="checkbox"/> Purchased Finished Water				
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,224,000				
Plant Category (per subsection 62-699.310(4), F.A.C.): V	Plant Class (per subsection 62-699.310(4), F.A.C.): C			
Licensed Operators	Name	License Class	License Number	Day(s) / Shift(s) Worked
Lead/Chief Operator:	Jean H. Pitzer	C	7605	Days 1st Shift
Other Operators:				

II Certification by Lead/Chief Operator

I, the undersigned water treatment plant operator licensed in Florida, am the lead/chief operator of the water treatment plant identified in part I of this report. I certify that the 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 NSF International Standard 60 or other applicable standards referenced in subsection 62-555.320(3), F.A.C. I also certify that the following additional operations records for this plant were prepared 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 rates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to provide these additional operations records to the PWS owner so the PWS owner can retain them, together with copies of this report, at a convenient location for at least ten years.

Signature and Date: _____ Printed or Typed Name: Jean Pitzer License Number: C7605

MONTHLY OPERATION REPORT FOR PW'Ss TREATING RAW GROUND WATER OR PURCHASED FINISHED WATER

PWS Identification Number: 1670647 Plant Name: Sunny Hills Well # 5

III. Daily Data for the Month/Year of: December, 2005

Means of Achieving Four-Log Virus Inactivation/Removal: Free Chlorine Chlorine Dioxide Ozone Combined Chlorine (Chloramines)
 Ultraviolet Radiation Other (Describe):

Type of Disinfectant Residual Maintained in Distribution System: Free Chlorine Combined Chlorine (Chloramines) Chlorine Dioxide

Day of the Month	Days Plant Staffed or Visited by Operator (Place "X")	Hours plant in Operation	Net Quantity of Finished Water Produced, gal.	CT Calculations, or UV Dose, to Demostate Four-Log Virus Inactivation, if Applicable*										Lowest Residual Disinfectant Concentration at Remote Point in Distribution System, mg/L	Emergency or Abnormal Operating Conditions; Repair or Maintenance Work that Involves Taking Water System Components Out of Operation	
				CT Calculations					UV Dose							
				Peak Flow Rate, gpd.	Lowest Residual Disinfectant Concentration (C) Before or at First Customer During Peak Flow, mg/L	Disinfectant Contact Time (T) at C Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp of Water, °C	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm ²	Minimum UV Dose Required, mW-sec/cm ²				
1	X	24.0			0.8										0.4	
2	X	24.0	1,000		0.8										0.4	
3	X	24.0	1,000		0.8										0.4	
4		24.0	1,000													
5	X	24.0			1.0										0.5	
6	X	24.0	1,000		1.0										0.5	
7	X	24.0			1.0										0.5	
8	X	24.0	1,000		0.9										0.5	
9	X	24.0			0.9										0.4	
10	X	24.0	500		0.9										0.4	
11		24.0	500													
12	X	24.0	1,000		0.9										0.4	
13	X	24.0	1,000		0.9										0.4	
14	X	24.0			0.9										0.4	
15	X	24.0	1,000		0.9										0.4	
16	X	24.0	1,000		0.9										0.3	
17	X	24.0	500		0.8										0.3	
18		24.0	500													
19	X	24.0			0.8										0.3	
20	X	24.0	1,000		0.8										0.4	
21	X	24.0	1,000		0.8										0.4	
22	X	24.0	1,000		0.8										0.4	
23	X	24.0	1,000		0.8										0.4	
24	X	24.0	1,500		0.8										0.4	
25		24.0	1,500													
26	X	24.0			0.8										0.4	
27	X	24.0	1,000		0.9										0.4	
28	X	24.0	1,000		0.8										0.4	
29	X	24.0	1,000		0.8										0.4	
30	X	24.0	1,000		0.8										0.4	
31	X	24.0	1,000													
Total			23,000													
Average			742													
Maximum			1,500													

* Refer to the instructions for this report to determine which plants must provide this information.