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

ee page 4 for instructions.

. General Information for the Month/Year of: August, 2016

A. Public Water System (PWS) Information

PWS Name: City of Inverness		PWS Identification Number: 6090861	
PWS Type: Community			
Number of Service Connections at End of Month: 4,395		Total Population Served at End of Month: 7,194	
PWS Owner: City of Inverness			
Contact Person: Thomas Romaelle		Contact Person's Title: Lead Operator	
Contact Person's Mailing Address: 3900 S Florida Ave		City: Inverness	State: Fl. / Zip Code: 34450
Contact Person's Telephone Number: 352-428-2434		Contact Person's Fax Number: 352-428-2434	
Contact Person's E-Mail Address: tromaelle@woodardcurran.com			

B. Water Treatment Plant Information

Plant Name: City of Inverness		Plant Telephone Number: (352) 428-2434	
Plant Address: 820 Pleasant Grove Road		City: Inverness	State: Fl. / Zip Code: 33452
Type of Water Treated by Plant: Raw Ground Water			
Permitted Maximum Day Operating Capacity of Plant, gallons per day: 1,700,000			
Plant Category (per subsection 62-699.310(4), F.A.C.): IV		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:	Thomas Romaelle	A	20065	Weekdays, Weekends
Other Operators:	Donald Rogers	C	23631	Anytime, as needed
	Thomas Smitley	C	22858	Weekdays, Weekends
	Angela Covell	C	23535	Anytime as needed

I. Certification by Lead/Chief Operator

, 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 nformation 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 lant 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 ates; and (2) if applicable, appropriate treatment process performance records. Furthermore, I agree to retain these additional operations records at the plant site for at least ten ears and to make them available for review upon request.

Thomas D. Romaelle

Signature and Date

Thomas Romaelle

Printed or Typed Name

20065

License Number

Monthly Operation Report for PWSs Fluoridating Water

'WS Identification Number: 6090861 Plant Name: City of Inverness

V. Daily Fluoridation Data for the Month / Year of: August, 2016

'ype of Fluoride Compound Used: x fluosilicic (hydrofluosilicic) acid

Commercial Purity of Fluoride Compound Used (per the chemical supplier): 23%

Day of the Month	Hours Plant in Operation	Net Quantity of Finish Water Produced, gallons	Quantity of Fluoride Chemical Fed, Pounds (or gallons for Fluosilicic Acid)	Fluoride Dose, mg/l	Fluoride Concentration in Finished Water at Entry to Distribution system, mg/L
1	24.00	0.900	35.00	1.05	1.06
2	24.00	1.080	35.00	1.05	0.81
3	24.00	1.097	35.00	1.05	0.90
4	24.00	1.045	35.00	1.05	1.06
5	24.00	0.880	35.00	1.05	0.91
6	24.00	0.798	35.00	1.05	0.87
7	24.00	0.821	35.00	1.05	0.91
8	24.00	0.936	35.00	1.05	1.01
9	24.00	0.855	35.00	1.05	1.12
10	24.00	0.886	35.00	1.05	1.09
11	24.00	0.954	35.00	1.05	0.95
12	24.00	0.872	35.00	1.05	0.96
13	24.00	1.065	35.00	1.05	0.96
14	24.00	1.113	35.00	1.05	0.94
15	24.00	1.008	35.00	1.05	0.96
16	24.00	0.779	35.00	1.05	1.12
17	24.00	0.949	35.00	1.05	0.94
18	24.00	1.070	35.00	1.05	0.94
19	24.00	0.583	35.00	1.05	0.99
20	24.00	0.988	35.00	1.05	0.99
21	24.00	1.065	35.00	1.05	0.99
22	24.00	0.754	35.00	1.05	0.94
23	24.00	0.832	35.00	1.05	0.91
24	24.00	1.124	35.00	1.05	0.79
25	24.00	0.987	35.00	1.05	0.84
26	24.00	0.638	35.00	1.05	1.21
27	24.00	1.154	35.00	1.05	0.91
28	24.00	1.611	35.00	1.05	0.92
29	24.00	1.223	35.00	1.05	1.10
30	24.00	0.631	35.00	1.05	1.17
31	24.00		35.00	1.05	0.61
'otal	744.00	28.70	1085.00	32.55	29.88
\verage	24.00	0.96	35.00	1.05	0.96

Monthly Operation Report for PWS Fluoridating Water

See page 3 for instructions.

I. General Information for the Month / Year of:	August, 2016				
A. Public Water System (PWS) Information					
PWS Name: City of Inverness		PWS Identification No.: 6090861			
PWS Type: X Community	Non-Transient Non-Community	Non-Community	Consecutive		
Number of Service Connections at End of Reporting Month: 4,395		Total Population Served at End of Month: 7,194			
PWS Owner: City of Inverness					
Contact Person: Thomas Romaelle		Contact Person's Title: Lead Operator			
Contact Person's Mailing Address:	3900 S Florida Ave	City: Inverness	State: Florida	Zip Code: 34450	
Contact Person's E-Mail Address:	tromaelle@woodardcurran.com	Contact Person's Fax Number:			
Contact Person's Telephone Number:	352 - 428 -2434				
B. Water Treatment Plant Information					
Plant Name:	City of Inverness	Telephone No.: 352 - 428 - 2434			
Plant Address:	820 Pleasant Grove Rd. (Public Works Road)	City: Inverness	State: Florida	Zip Code: 34452	

II. STATEMENT BY LEAD/CHIEF WATER TREATMENT PLANT OPERATOR FOR THE MONTH/YEAR OF

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.

Signature and Date:	Thomas Romaelle Printed or Typed Name	20065 License Number

III. Check Sample Results for the Month / Year of:* August, 2016

Sample Name / Number	Sample Location	Fluoride Concentration in Sample per Analysis by Authorized Representative of PWS, mg/l	Fluoride Concentration in Sample per Analysis by DOH Laboratory or Laboratory Certified by DOH, mg/L
Distribution System Sample 1	450 Pleasant Grove	1.12	0.70
Distribution System Sample 2	117 North Seminole Street	1.12	0.74
Distribution System Sample 3			

* Complete Part III of this report only for PWSs not using a certified laboratory to perform all daily measurements of fluoride concentration in the finished water from each of the PWS's treatment plants

DEP Form 62-555.900(5)
Effective August 28, 2003

Telephone No.: (770) 365-1756

MONTHLY OPERATION REPORT FOR PWS's PRACTICING PO4

PWS Identification Number:	6090861	Plant Name:	City of Inverness

IV. Daily Phosphate Data for the Month/Year of: August, 2016

Type of Fluoride Chemical Used:

Day of the Month	Hours Plant in Operation	Plant pH	Alkalinity, mg/l	Phosphate Dose, mg/L	Phosphate Concentration in Finished Water at Entry to Distribution System, mg/L
1	24	7.67	140.00	1.25	1.27
2	24	7.85	140.00	1.25	1.26
3	24	7.94	160.00	1.25	1.26
4	24	7.87	140.00	1.25	1.24
5	24	7.92	140.00	1.25	1.29
6	24	7.90	140.00	1.25	1.31
7	24	8.09	160.00	1.25	1.29
8	24	7.92	150.00	1.25	1.24
9	24	7.99	150.00	1.25	1.23
10	24	8.01	140.00	1.25	1.24
11	24	7.99	140.00	1.25	1.27
12	24	8.04	150.00	1.25	1.22
13	24	8.07	150.00	1.25	1.28
14	24	8.02	160.00	1.25	1.27
15	24	8.02	150.00	1.25	1.22
16	24	8.11	150.00	1.25	1.15
17	24	7.99	160.00	1.25	1.26
18	24	7.97	140.00	1.25	1.29
19	24	7.99	140.00	1.25	1.21
20	24	8.04	140.00	1.25	1.20
21	24	8.08	160.00	1.25	1.24
22	24	7.93	160.00	1.25	1.29
23	24	7.96	160.00	1.25	1.24
24	24	7.98	180.00	1.25	1.23
25	24	8.00	180.00	1.25	0.54
26	24	7.98	180.00	1.25	0.52
27	24	7.99	160.00	1.25	1.16
28	24	7.99	180.00	1.25	1.31
29	24	8.01	160.00	1.25	1.19
30	24	8.00	180.00	1.25	1.89
31	24	8.05	160.00	1.25	2.00
Total		247	4,800		
Average		8	155	1.25	1.25

MONTHLY OPERATION REPORT FOR PWSs Practicing PO4

See page 3 for instructions

I. General Information for the Month/Year of: August, 2016

A. Public Water System (PWS) Information

PWS Name: City of Inverness	PWS Identification Number: 6090861
PWS Type: X Community Non-Transient Non-Community	Transient Non-Community Consecutive
PWS Owner: City of Inverness	
Contact Person: Thomas Romalle	Contact Person's Title: Lead Operator
Contact Person's Mailing Address: 820 Pleasant Grove Road (P	City: Inverness State: Fl. Zip Code: 34450
Contact Person's Telephone Number: 352-428-2434	Contact Person's Fax Number:
Contact Person's E-Mail Address: tromaelle@woodardcurran.com	

B. Water Treatment Plant Information

Plant Name: City of Inverness	Plant Telephone Numbe r 352-428-2434
Plant Address: 820 Pleasant Grove Road (Public Works Road)	City: Inverness State: Fl. Zip code 34450

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 th information provided in this report is true and accurate to

Signature and Date	Printed or Typed Name	License Number
Thomas D. Romaelle	Thomas Romaelle	20065

III. Check Sample Results for the Month/Year of:* August, 2016

Sample Name/Number	Sample Location	PO3 Concentration in Sample per Analysis by Authorized Representative of PWS, mg/L	PO4 Concentration in Sample per Analysis by DOH Laboratory or Laboratory Certified DOH, mg/L
POE	820 Pleasent Grove Rd.	1.15	0.52
POE	820 Pleasant Grove Rd.	1.24	0.49
POE	820 Pleasant Grove Rd.		

**Complete Part III of this report only for PWSs not using a certified laboratory to perform all daily measurements of flouride concentration in the finished water from each of the PWS's treatment plants.*

MONTHLY OPERATING REPORT FOR PWSs TREATING RAW GROUNDWATER OR PURCHASED FINISHED WATER

PWS Identification Number: 6090861 | Plant Name: City of Inverness

III. Daily Data for the Month/Year of: August, 2016

Means of Achieving Four-Log Virus Inactivation/Removal: * N/A

Type of Disinfectant Residual Maintained in Distribution System: X Free Chlorine | Combine Chlorine(Chloramines) | Chlorine Dioxide

			CT Calculations, or UV Dose, to Demonstrate Four-Log Virus Inactivation, if Applicable*										
			CT Calculations							UV Dose			
Day of the Month	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 Measurement Point During Peak Flow, minutes	Lowest CT Provided Before or at First Customer During Peak Flow, mg-min/L	Temp. of Water, OC	pH of Water, if Applicable	Minimum CT Required, mg-min/L	Lowest Operating UV Dose, mW-sec/cm2	Minimum UV Dose Required, mW-sec/cm2	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
1	24	944		2.68			24.60	7.67				2.19	
2	24	1,094		4.20			25.30	7.85				1.94	
3	24	910		4.29			25.10	7.94				1.90	
4	24	1,023		3.84			25.70	7.87				3.48	
5	24	814		3.47			25.10	7.92				4.13	
6	24	839		3.39			24.30	7.90				3.37	
7	24	801		3.31			23.70	8.09				2.79	
8	24	909		3.02			23.60	7.92				3.01	
9	24	936		3.15			24.20	7.99				3.13	
10	24	876		3.08			24.90	8.01				2.22	
11	24	840		4.05			24.80	7.99				2.72	
12	24	807		4.34			24.10	8.04				2.62	
13	24	1,027		3.63			24.70	8.07				1.66	
14	24	1,072		3.71			24.30	8.02				2.07	
15	24	817		3.57			27.50	8.02				2.62	
16	24	765		3.69			26.70	8.11				3.30	
17	24	935		3.31			25.10	7.99				2.62	
18	24	1,002		2.98			24.80	7.97				1.93	
19	24	816		3.47			26.30	7.99				3.46	
20	24	1,068		3.92			25.90	8.04				3.98	
21	24	1,153		3.89			25.70	8.08				3.67	
22	24	741		3.62			29.40	7.93				3.81	
23	24	930		3.29			26.80	7.96				3.99	
24	24	1,090		3.11			25.70	7.98				3.56	
25	24	1,153		3.31			26.00	8.00				3.88	
26	24	726		3.42			29.50	7.98				3.79	
27	24	1,084		3.47			25.20	7.99				3.87	
28	24	851		3.51			26.40	7.99				3.76	
29	24	1,131		3.06			25.70	8.01				3.69	
30	24	692		3.27			27.30	8.00				3.73	
31	24	1,033		3.47			24.50	8.05				3.86	

Total	28,879
Average	932
Maximum	1,153

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