Instructions for Completing Form 62-555.350(12)(b), "Supplemental Monthly Operation Report for PWSs Receiving Advanced Treated Water"

Form 62-555.350(12)(b) shall be completed and submitted (with Form 62-555.900(2)) by public water systems treating and using advanced treated water as a source. This form is intended to supplement the information provided in Form 62-555.900(2) and provide verification of the log inactivation achieved by the facility.

Data entered shall be related solely to the treatment provided by the P.W.S. A treatment process may only count towards a facility's log-removal one time. For example, log reductions provided by UV treatment at an ATWF may only count towards the log removals at the ATWF. To receive log-removal credits at the PWS, additional UV disinfection must be provided. "

Be sure to select all applicable buttons and fill in the blue blanks. Yellow cells cannot be edited; they contain formulas and display calculations. Fill out all worksheet pages in the workbook. Do not add or delete any cells, rows, or columns in the form. Doing so will disable the automatic calculations.

Parts I and V are part of this document and must be completed and submitted with the spreadsheets in Parts II, III and IV.

Instructions for "Chemical Disinfection Crypto" Tab

The table in Part II, Log Inactivation of Cryptosporidium through Chemical Disinfection, should be filled out in accordance with the instructions for "CT Calculator Unit 1, Unit 2 worksheets" that start on page B.1.-5 in the Department's Compliance Manual for Subpart H Systems.

Instructions for "UV Disinfection" Tab

Part III, "Log Reduction through Ultraviolet Disinfection", will calculate the log reductions achieved through ultraviolet (UV) disinfection. Column B, "Volume of Finished Water Produced, gal.", will be the same values used in Column F of the "Treatment Summary" tab in Form 62-555.900(2), provided that all water produced is treated in the UV process. If this is not the case, Column B should reflect the volume of water treated in this way. Column C, "Lowest Operating Dose, mJ/cm2", should contain the lowest operating dose measured in the UV reactor for each day.

Columns D, E, and F will automatically populate with the log reductions achieved through UV disinfection for Giardia, virus, and Cryptosporidium, respectively. These numbers are based on Table 2-4 in the Environmental Protection Agency's (EPA's) "Innovative Approaches for Validation of Ultraviolet Disinfection Reactors for Drinking Water Systems" (April 2020).

Column G, "Total Quantity of Non-Spec UV Water, gal.", should be filled out with the total volume of water delivered to the public each day that was treated by UV reactors operating outside of the validated conditions. This is to verify compliance with 40 CFR 141.720(d)(3)(ii). If the value calculated in cell G39 is greater than 5%, no log reduction credit may be given to the UV disinfection system.

Instructions for "Pathogen Compliance" Tab

Part IV, “Compliance with Log Reduction Requirements”, calculates the total log reductions achieved through filtration, chemical disinfection, and ultraviolet disinfection.

The log reductions required for the facility will be entered in cells B7 – D7 in Table A. Unless a larger log reduction is required to meet the requirements of Chapter 62-565, F.A.C., these values shall be in accordance with Rule 62-550.817, F.A.C.: 2-log reduction for Cryptosporidium, 3-log reduction for Giardia, and 4-log reduction for virus. These values will auto-populate in Tables C.1-C3. if a required log reduction is entered that is lower than these minimums. The numbers entered in Cells B8 - D8 in Table A shall contain the log-removal credits for the type of filtration utilized (obtained from Table B) and will automatically populate Column B in Tables C1., C.2., and C.3.

Column C in Tables C.1. and C.2., “Log Removal through Disinfection”, are the final log inactivations for each day calculated in Form 62-555.900(2). These are found in Columns Q and R in the CT Calculator Unit tabs, and should be transferred over from that form. The log removal credits for UV Disinfection will automatically populate from the previous tab, with a value of zero transferring in the event the percentage of off-spec water delivered to the system is greater than 5% (as calculated in cell G38 in the "UV Disinfection" tab).

SUPPLEMENTAL MONTHLY OPERATION REPORT FOR PWSs RECEIVING ADVANCED TREATED WATER

I. Water Treatment Plant Information for the Month Year of: _____

A. Public Water System (PWS) Information

PWS Name: _____

PWS Type: _____ PWS Identification Number:_____

Total Wholesale Population Served at End of Month: _____

Total Retail Population Served at End of Month: _____

Number of Service Connections at End of Month: _____

PWS Owner: _____

Contact Person: _____ Title: _____

Contact Person's Mailing Address: _____

City:_____ State: _____ Zip Code: _____

Contact Person's Telephone Number: _____

Contact Person's Fax Number: _____

Contact Person's E-mail Address: _____

B. Water Treatment Plant Information

Plant Name: _____

Plant Address: _____

Plant Telephone Number: _____

Permitted Maximum Day Operating Capacity of Plant, million gallons per day (MGD): _____

Plant Category and Class per Rule 62-699.310(2), F.A.C. _____

C. Advanced Treatment Water Facility (ATWF) Information

ATWF Name: _____

ATWF Identification Number: _____

ATWF Address: _____

ATWF Contact Person: _____ Title: _____

ATWF Contact Person's Telephone Number: _____

Email Address: _____

SUPPLEMENTAL MONTHLY OPERATION REPORT FOR PWSs RECEIVING ADVANCED TREATED WATER

V. Certificate by Lead/Chief Water Treatment Plant Operator for the Month/Year of:

_____

I, the undersigned lead/chief operator of the water treatment plant listed in Part I of this form, certify that, to the best of my knowledge and belief, the information provided in this report is true and accurate. I certify that all drinking water treatment chemicals used at this plant conform to one of the following as required by Rule 62-555.320(3)(a), F.A.C.: NSF International Standard 60, standards in the Water Chemicals Codex, or standards in the Food Chemicals Codes. Also, I certify that the following additional operations records for the plant listed in Part I of this form were prepared each day that a certified operator staffed or visited the plant during the month indicated above:

(1) records of amounts of chemicals used and chemical feed rates; and
(2) appropriate treatment process performance records, including individual filter turbidity monitoring.

Signature and Date (Import Signature here)

_____

Name (please type): _____

License Number: _____

Comments: