ATTACHMENT D

Industrial Wastewater Ground Water Monitoring Construction, Sampling, and Reporting Requirements

The land application system for the industrial wastewater is a four cell, 600-acre site.

The Licensee shall sample ground water at the monitoring wells identified in this Attachment, in accordance with this Attachment and the Conditions of Certification.

1. Construction Requirements

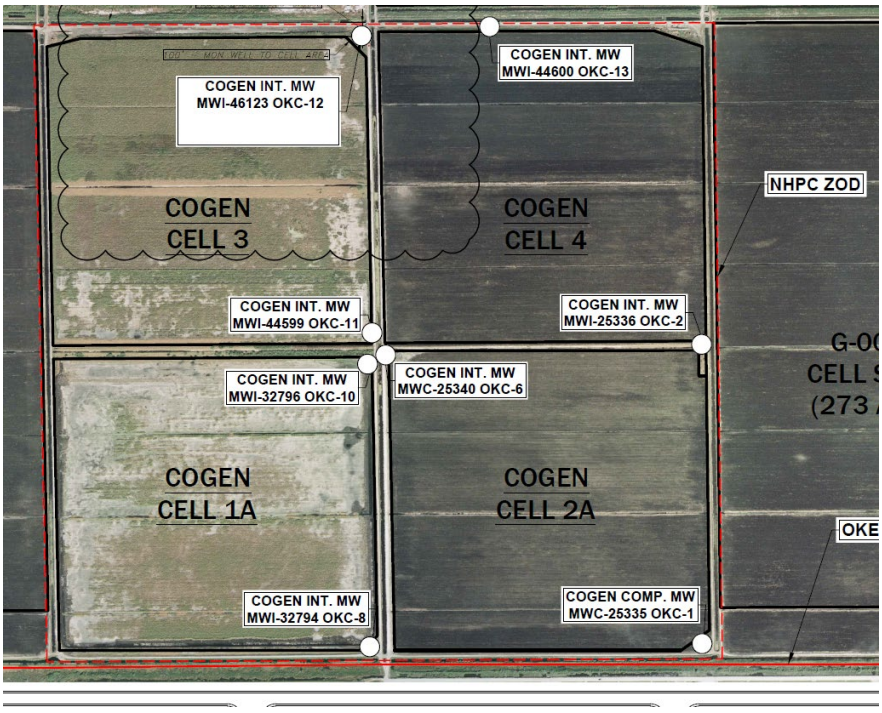
a. Prior to construction of any new ground water monitoring well, a soil boring shall be made at the new monitoring well location in order to properly determine the well depth and screen interval.

b. The Licensee shall give at least 72-hours-notice to the Department, prior to the installation of any new monitoring well required by these Conditions.

c. Within 30 days after installation of a new monitoring well, the Licensee shall submit to the Department's South District Office detailed information on the well's location and construction on DEP Form 62-520.900(3), Monitor Well Completion Report.

d. Upon completion of construction of any new background monitoring well, sampling for initial characterization of the monitoring well shall be performed for Total Dissolved Solids, Total Phosphorous, Nitrate, Nitrite, TKN, Chloride, Sodium, pH (field), Specific Conductance (field), Gross Alpha, Water Level, and EPA methods 601, 602, and 608 or equivalent approved method for 40 CFR 136 with detection limits equal to or lower for the parameters listed.

e. The ground water monitoring wells for the Facility shall be located as depicted in the Site map below:



Note: The location of the background monitoring well (OKC-14; MWB 53199) is not within the area of this site map. The well is approximately 4.6 miles northwest from the center of the Cogen cells. The well is the common background well for the Licensee's three industrial wastewater facilities.

2. Sampling Requirements

a. Within 90 days of installation of any new background-monitoring well, the Licensee shall begin sampling ground water at the new monitoring well in accordance with this Attachment.

b. The following monitoring wells shall be sampled for the rotating four cell (1A, 2A, 3 & 4) percolation pond land application systems R-001, R-002, R-003 and R-004.

Monitoring Well ID	**Alternate Well Name and/or Description of Monitoring Location**	**Depth (Feet)**	**Aquifer Monitored**	**Monitoring Frequency**
MWB-53199	OKC-14 Background Well. Approximately 4.6 miles northwest of the center of land application system. (Existing)	18.0	Surficial	All Quarters
MWC-25335	OKC-1 Compliance Well. Located in the southeast corner of Cell #2A. (Existing)	17.54	Surficial	1st & 3rd Quarters
MWI-25336	OKC-2 Intermediate Well. Located in the southeast corner of Cell #4. (Existing)	16.0	Surficial	1st & 3rd Quarters
MWI-25340	OKC-6 Intermediate Well. Located in the northwest corner of Cell #2A. (Existing)	15.5	Surficial	2nd & 4th Quarters
MWI-32794	OKC-8 Intermediate Well. Located in the southeast corner of Cell #1A. (Existing)	17.5	Surficial	2nd & 4th Quarters
MWI-32796	OKC-10 Intermediate Well. Located in the northeast corner of Cell #1A. (Existing)	17.0	Surficial	2nd & 4th Quarters
MWI-44599	OKC-11 Intermediate Well. Located in the southeast corner of Cell #3. (Existing)	17.0	Surficial	1st & 3rd Quarters
MWI-46123	OKC-12 Intermediate Well. Located in the northeast corner of Cell #3. (Existing)	17.0	Surficial	2nd & 4th Quarters

MWI-44600	OKC-13 Intermediate Well. Located along the center north side of Cell #4. (Existing)	17.0	Surficial	1st & 3rd Quarters

MWB = Background; MWI = Intermediate; MWC = Compliance, MWP = Piezometer

c. The monitor wells specified above, shall be sampled for the parameters listed below:

Parameter Name	***Compliance Well Limit**	**Units**	**Sample Type**
Specific Conductance (field)	Report	UMHO/CM	Grab
pH	6.5-8.5	SU	Grab
Chloride (as Cl)	250.0	MG/L	Grab
Solids, Total Dissolved (TDS)	500.0	MG/L	Grab
Water Level Relative to NGVD	Report	FEET	Measured
Sodium, Total Recoverable	160.0	MG/L	Grab

*This column summarizes Class G-II maximum contaminant level criteria applicable at the Compliance Well. Refer to Rule 62-520.420, F.A.C. These are not effluent limits.

d. Water levels shall be recorded prior to evacuating the well for sample collection. Elevation references shall include the top of the well casing and land surface at each well site (NGVD allowable) at a precision of plus or minus 0.01 feet.

e. Ground water monitoring wells shall be purged prior to sampling to obtain a representative sample.

f. If a monitoring well becomes damaged or cannot be sampled for some reason, the Licensee shall notify the Department immediately and a written report shall follow within seven days detailing the circumstances and remedial measures taken or proposed. Repair or replacement of monitoring wells shall be approved in advance by the Department.

g. Every 5 years the Licensee shall submit the results of sampling the background and compliance monitoring wells, and other monitoring wells if specified by the Department, listed in the GWMR, for the primary drinking and secondary drinking water parameters included in Chapter 62-550, F.A.C. (excluding radionuclides, asbestos, acrylamide, Dioxin, butachlor, epichlorohydrin, pesticides, and PCBs, unless reasonably expected to be a constituent of the discharge or an artifact of the site).

3. Reporting Requirements

a. The Licensee shall complete and submit to the Department the results of the groundwater analyses. The results shall be reported on Part D of DEP Form 62-620.910(10), Discharge Monitoring Report (DMR). The facility reference number shall be FLA150355

b. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

SAMPLE QUARTER	SAMPLE PERIOD	DMR Due Date
1st Quarter	January 1 – March 31	April 28
2nd Quarter	April 1 – June 30	July 28
3rd Quarter	July 1 – September 30	October 28
4th Quarter	October 1 – December 31	January 28

c. DMRs shall be submitted for each required monitoring period including quarters of no discharge.

d. The Licensee shall submit the completed DMR forms to the Department at SouthDistrict@floridadep,gov or by the electronic DMR system approved by the Department (EzDMR) using the DEP Business Portal at https://www.fldepportal.com/go/.

e. The Licensee shall call the South District Office phone number, (239) 344-5600 if unable to submit reports or notifications.

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-25336
Well Type: Intermediate
Description: OKC-2 " "
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (mm/dd/yyyy)

COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-25340
Well Type: Intermediate
Description: OKC-6 " "
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-32794
Well Type: Intermediate
Description: OKC-8 monitor well for the Co-Gen facility
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-32796
Well Type: Intermediate
Description: OKC-10
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWB-53199
Well Type: Background
Description: OKC-14 Background
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-44600
Well Type: Intermediate
Description: OKC-13
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach

Monitoring Well ID: MWC-25335
Well Type: Compliance
Description: OKC-1 Existing compliance well. Located in the southeast corner of Cell #2A

Report Frequency: Quarterly
Program: Industrial

Office: South District

Re-submitted DMR: ☐

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		500	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		250	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		160	mg/L	Grab	Quarterly				
pH	00400		6.5 - 8.5	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-46123
Well Type: Intermediate
Description: OKC-12 INT. MW CO-GEN
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

GROUNDWATER MONITORING REPORT - PART D

Facility Name: Okeelanta Power L P Cogeneration
Permit Number: FLA150355
County: Palm Beach
Office: South District

Monitoring Well ID: MWI-44599
Well Type: Intermediate
Description: OKC-11
Re-submitted DMR: ☐

Report Frequency: Quarterly
Program: Industrial

Monitoring Period From: _____ To: _____

Date Sample Obtained: _____

Time Sample Obtained: _____

Was the well purged before sampling? ___Yes ___ No

Parameter	PARM Code	Sample Measurement	Permit Requirement	Units	Sample Type	Frequency of Analysis	Detection Limits	Analysis Method	Sampling Equipment Used	Samples Filtered (L/F/N)
Water Level Relative to NGVD	82545		Report	ft	Measured	Quarterly				
Specific Conductance	00095		Report	umhos/cm	Grab	Quarterly				
Solids, Total Dissolved (TDS)	70295		Report	mg/L	Grab	Quarterly				
Chloride (as Cl)	00940		Report	mg/L	Grab	Quarterly				
Sodium, Total Recoverable	00923		Report	mg/L	Grab	Quarterly				
pH	00400		Report	s.u.	Grab	Quarterly				

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COMMENTS AND EXPLANATION (Reference all attachments here):

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28th of the month following the monitoring period. Facilities who submit their DMR(s) electronically through eDMR do not need to submit a hardcopy DMR. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data.

When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.
DRY	Dry Well
FLD	Flood disaster.
IFS	Insufficient flow for sampling.
LS	Lost sample.
MNR	Monitoring not required this period.

CODE	DESCRIPTION/INSTRUCTIONS
NOD	No discharge from/to site.
OPS	Operations were shutdown so no sample could be taken.
OTH	Other. Please enter an explanation of why monitoring data were not available.
SEF	Sampling equipment failure.

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used, unless indicated otherwise in the permit or on the DMR:

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign ("<") followed by the laboratory's MDL value, e.g. < 0.001. A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A -DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

Resubmitted DMR: Check this box if this DMR is being re-submitted because there was information missing from or information that needed correction on a previously submitted DMR. The information that is being revised should be clearly noted on the re-submitted DMR (e.g. highlight, circle, etc.)
No Discharge From Site: Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number; however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.
Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Sample Measurement: Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units. Data qualifier codes are not to be reported on Part A.
No. Ex.: Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.
Frequency of Analysis: The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.
Sample Type: The shaded areas in this column contain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.
Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.
Comment and Explanation of Any Violations: Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B - DAILY SAMPLE RESULTS

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
<	The compound was analyzed for but not detected.
A	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample.

To calculate the monthly average, add each reported value to get a total. For flow, divide this total by the number of days in the month. For all other parameters, divide the total by the number of observations.
Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.
Time Sample Obtained: Enter the time the sample was taken.
Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that. Data qualifier codes are not to be reported on Part D.
Detection Limits: Record the detection limits of the analytical methods used.
Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources.
Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. airlift, bucket/bailer, centrifugal pump, etc.)
Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).
Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.
Comments and Explanation: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).
Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements; one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.
Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.
No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.
$CBOD_5$: Enter the average $CBOD_5$ of the reclaimed water discharged during the period shown in duration of discharge.
TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.
Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall on Part A. The cumulative rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.
Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year. The cumulative rainfall for the average rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.
No. of Days LWWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.
Reason for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.