

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B 3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Please read instructions before completing this form.

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow	Sample Measurement	0.273	0.564	MGD				0	Daily	Metered
Storet No. 50053 Mon. Site No. G-002	Permit Requirement	0.738	0.791	MGD					Daily	Metered
TDS	Sample Measurement				1260	1342	mg/l	0	2/Month	Grab
Storet No. 00525 Mon. Site No. G-002	Permit Requirement				Report	Report	mg/l		2/Month	Grab
Chlorides	Sample Measurement				235.5	249	mg/l	0	2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Permit Requirement				Report	Report	mg/l		2/Month	Grab
Nitrates	Sample Measurement				15.7775	30.6	mg/l	0	Weekly	Grab
Storet No. 00620 Mon. Site No. G-002	Permit Requirement				Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	39.94	106.55	#/Day				0	Weekly	Grab
Storet No. NA Mon. Site No. G-002	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Nitrogen Total	Sample Measurement				18.34	34.3	mg/l	0	Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Permit Requirement				Report*	Report*	mg/l		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average. I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/02/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

JAN. 2005

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Nitrogen (Total), Calculate and Report Storet No. NA Mon. Site No. G-002	Sample Measurement	45.59	119.43	#/Day			0	Weekly	Grab
	Permit Requirement							Weekly	Grab
Sodium Storet No. 00929 Mon. Site No. G-002	Sample Measurement				115.05	213	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Sulfates Storet No. 00945 Mon. Site No. G-002	Sample Measurement				364.5	391	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Florida Pro Storet No. 31666 Mon. Site No. G-002	Sample Measurement				0.21	0.24	0	Weekly	Grab
	Permit Requirement				Report	Report		Weekly	Grab
pH Storet No. 00400 Mon. Site No. G-002	Sample Measurement				6.89	7.52	0	2/Month	Grab
	Permit Requirement				6.0	8.5		2/Month	Grab
Storet No. Mon. Site No.	Sample Measurement								
	Permit Requirement								
Storet No. Mon. Site No.	Sample Measurement								
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Storet No. Mon. Site No.	Sample Measurement								
	Permit Requirement								

FEB. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Walsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 2/01/05 To: 2/29/05
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.181	0.406	MGD				0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD					Daily	Metered
TDS	Sample Measurement				963	1260	mg/l	0	2/Month	Grab
	Permit Requirement				Report	Report	mg/l		2/Month	Grab
Chlorides	Sample Measurement				163.55	228	mg/l	0	2/Month	Grab
	Permit Requirement				Report	Report	mg/l		2/Month	Grab
Nitrates	Sample Measurement				6.1	8.74	mg/l	0	Weekly	Grab
	Permit Requirement				Report	Report	mg/l		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	11.54	24.19	#/Day				0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Storet No. NA Mon. Site No. G-002	Sample Measurement									
	Permit Requirement									
Nitrogen Total	Sample Measurement				21.295	64.8	mg/l	0	Weekly	Grab
	Permit Requirement				Report	Report	mg/l		Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Sample Measurement									
	Permit Requirement									

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/03/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

MARCH 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 3/01/05 To: 3/31/05
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow	Sample Measurement	0.237	0.426	MGD						
	Permit Requirement	0.738	0.791	MGD				0	Daily	Metered
TDS	Sample Measurement					849	1580	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Chlorides	Sample Measurement					141.125	277	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Nitrates	Sample Measurement					4.533	6.54	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	11.11	18.42	#/Day				0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Nitrogen Total	Sample Measurement					8.106	11.19	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab

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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/04/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
3319 Maguire Blvd. Orlando, FL 32803-3767
Permittee: Industrial Wastewater, Ste 200B
Permittee Name: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 4/1/05 To: 4/30/05
 LIMIT: Final

GROUP: IW

DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max	Units	Min.	Avg.	Max			
Flow	Sample Measurement	0.236	0.432	MGD			0	Daily	Metered
Storet No. 50053 Mon. Site No. G-002	Permit Requirement	0.738	0.791	MGD				Daily	Metered
TDS	Sample Measurement				1211	1700	0	2/Month	Grab
Storet No. 00525 Mon. Site No. G-002	Permit Requirement				Report	Report		2/Month	Grab
Chlorides	Sample Measurement				198	294	0	2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Permit Requirement				Report	Report		2/Month	Grab
Nitrates	Sample Measurement						0	Weekly	Grab
Storet No. 00620 Mon. Site No. G-002	Permit Requirement				Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	16.16	30.78	#/Day			0	Weekly	Grab
Storet No. NA Mon. Site No. G-002	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Nitrogen Total	Sample Measurement						0	Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Permit Requirement				Report*	Report*		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/05/15

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 To: 5/31/05
 MONITORING PERIOD-From: 5/01/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GROUP: IW
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 WAFR SITE

WAFR SITE NO. 6235

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units		Min.	Avg.	Max.	Units			
Flow	Sample Measurement	0.374	0.570	MGD						0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD								
TDS	Sample Measurement						2425	2490	mg/l	0	2/Month	Grab
	Permit Requirement						Report	Report	mg/l			
Chlorides	Sample Measurement						295.5	300	mg/l	0	2/Month	Grab
	Permit Requirement						Report	Report	mg/l			
Nitrates	Sample Measurement						5.6875	7.58	mg/l	0	Weekly	Grab
	Permit Requirement						Report	Report	mg/l			
Nitrates, Calculate and Report	Sample Measurement	16.80	20.96	#/Day						0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day								
Nitrogen Total	Sample Measurement						10.1	12.6	mg/l	0	Weekly	Grab
	Permit Requirement						Report	Report	mg/l			
Storet No. 00600 Mon. Site No. G-002	Sample Measurement									0	Weekly	Grab
	Permit Requirement											

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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/06/15

ADDITIONAL SHEET 1

KUA/ Cane Island Power Plant FLA010961

Facility ID 3049M06279

Discharge Point # G-002

Please read instructions before completing this form.

[illegible]

JUNE 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Site 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn: James C. Welsh, President
 FACILITY: KUA/Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.3 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 6/1/05 To: 6/30/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.409	0.542	MGD					0	Daily	Metered
TDS	0.738	0.791	MGD						Daily	Metered
Storet No. 00525 Mon. Site No. G-002					1355	1580	mg/l	0	2/Month	Grab
Chlorides					348	397	mg/l	0	2/Month	Grab
Storet No. 00940 Mon. Site No. G-002					7388	965	mg/l	0	Weekly	Grab
Nitrates									Weekly	Grab
Storet No. 00620 Mon. Site No. G-002								0	Weekly	Grab
Nitrates, Calculate and Report	24.16	32.18	#/Day						Weekly	Grab
Storet No. NA Mon. Site No. G-002									Weekly	Grab
Nitrogen Total									Weekly	Grab
Storet No. 00600 Mon. Site No. G-002					10244	12.1	mg/l	0	Weekly	Grab
									Weekly	Grab

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 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/07/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

JUNE 2005

ADDITIONAL SHEET 1

KUA/ Cane Island Power Plant FLA010961 Facility ID 3049M06279 Discharge Point # G-002

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units		Avg.	Min.	Max.	Units			
Nitrogen (Total), Calculate and Report											
Storet No. NA Mon. Site No. G-002	Sample Measurement	34.66	44.71	#/Day					0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day						Weekly	Grab
Sodium											
Storet No. 00929 Mon. Site No. G-002	Sample Measurement				181		207	mg/l	0	2/Month	Grab
	Permit Requirement				Report		Report	mg/l		2/Month	Grab
Sulfates											
Storet No. 00945 Mon. Site No. G-002	Sample Measurement				451.5		598	mg/l	0	2/Month	Grab
	Permit Requirement				Report		Report	mg/l		2/Month	Grab
Florida Pro											
Storet No. 31666 Mon. Site No. G-002	Sample Measurement				0.2		0.2	mg/l	0	Weekly	Grab
	Permit Requirement				Report		Report	mg/l		Weekly	Grab
pH											
Storet No. 00400 Mon. Site No. G-002	Sample Measurement				6.68	7.10	7.63	SU	0	2/Month	Grab
	Permit Requirement				6.0		8.5	SU		2/Month	Grab
	Sample Measurement										
Storet No. Mon. Site No.	Permit Requirement										
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	Sample Measurement										

July 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 7/01/05 To: 7/31/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.544	0.742	MGD					0	Daily	Metered
	0.738	0.791	MGD						Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002					1385	1460	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002					201	216	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					8.9325	11	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	41.38	53.56	#/Day					0	Weekly	Grab
	Report	Report	#/Day						Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					11.675	14.2	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/08/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

ADDITIONAL SHEET 1

Aug. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 8/01/05 To: 8/31/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	Sample	0.549	0.626	MGD			0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD				Daily	Metered
TDS									
Storet No. 00525 Mon. Site No. G-002	Sample				1230	1310	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Chlorides									
Storet No. 00940 Mon. Site No. G-002	Sample				161	212	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Nitrates									
Storet No. 00620 Mon. Site No. G-002	Sample				7.77	12.6	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002	Sample	32.62	55.75	#/Day			0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002	Sample				11.414	16.7	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/09/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type	
		Avg.	Max.	Units	Min.	Avg.	Max.				Units
Nitrogen (Total), Calculate and Report											
Storet No. NA Mon. Site No. G-002	Sample Measurement	49.07	73.90	#/Day				0	Weekly	Grab	
	Permit Requirement								Weekly	Grab	
	Sample Requirement										
Sodium											
Storet No. 00929 Mon. Site No. G-002	Sample Measurement					263	322	mg/l	0	2/Month	Grab
	Permit Requirement					Report	Report	mg/l	2/Month	Grab	
	Sample Requirement										
Sulfates											
Storet No. 00945 Mon. Site No. G-002	Sample Measurement					409	420	mg/l	0	2/Month	Grab
	Permit Requirement					Report	Report	mg/l	2/Month	Grab	
	Sample Requirement										
Florida Pro											
Storet No. 31666 Mon. Site No. G-002	Sample Measurement					0.0652	0.24	mg/l	0	Weekly	Grab
	Permit Requirement					Report	Report	mg/l	Weekly	Grab	
	Sample Requirement										
pH											
Storet No. 00400 Mon. Site No. G-002	Sample Measurement					6.86	7.77	SU	0	2/Month	Grab
	Permit Requirement					6.0	8.5	SU		2/Month	Grab
	Sample Requirement										
Storet No.	Mon. Site No.										
Storet No.	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
Storet No.	Mon. Site No.										
Storet No.	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
Storet No.	Mon. Site No.										
Storet No.	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

See 2nd

SEP 7. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 9/1/05 To: 9/30/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.541	0.749	MGD			0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD				Daily	Metered
TDS									
Storet No. 00525 Mon. Site No. G-002	Sample Measurement				1285	1310	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Chlorides									
Storet No. 00940 Mon. Site No. G-002	Sample Measurement				227	230	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Nitrates									
Storet No. 00620 Mon. Site No. G-002	Sample Measurement				9.2325	11.7	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002	Sample Measurement	41.69	65.02	#/Day			0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002	Sample Measurement				13.3	14.7	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/10/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

ADDITIONAL SHEET 1

Oct. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 10/01/05 To: 10/31/05
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	0.445	0.647	MGD				0	Daily	Metered
Sample Measurement	0.738		MGD					Daily	Metered
Permit Requirement									
TDS									
Storet No. 00525 Mon. Site No. G-002					1245	1250	0	2/Month	Grab
Sample Measurement					Report	Report		2/Month	Grab
Permit Requirement									
Chlorides									
Storet No. 00940 Mon. Site No. G-002					224	244	0	2/Month	Grab
Sample Measurement					Report	Report		2/Month	Grab
Permit Requirement									
Nitrates									
Storet No. 00620 Mon. Site No. G-002					7.8375	12	0	Weekly	Grab
Sample Measurement					Report	Report		Weekly	Grab
Permit Requirement									
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002	28.68	56.71	#/Day				0	Weekly	Grab
Sample Measurement	Report	Report	#/Day					Weekly	Grab
Permit Requirement									
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002					11	14.6	0	Weekly	Grab
Sample Measurement					Report	Report		Weekly	Grab
Permit Requirement									

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/11/15
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

Facility ID 3049M06279 Discharge Point # G-002

[illegible]

NOV. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 11/1/05 To: 11/30/05
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	0.211	0.540	MGD				0	Daily	Metered
TDS	0.738	0.791	MGD					Daily	Metered
Storet No. 00325 Mon. Site No. G-002					1205	1350	0	2/Month	Grab
Chlorides					Report	Report		2/Month	Grab
Storet No. 00940 Mon. Site No. G-002					232	310	0	2/Month	Grab
Nitrates					Report	Report		2/Month	Grab
Storet No. 00620 Mon. Site No. G-002					6.592	11.2	0	Weekly	Grab
Nitrates, Calculate and Report					Report*	Report*		Weekly	Grab
Storet No. NA Mon. Site No. G-002	10.63	28.08	#/Day				0	Weekly	Grab
Nitrogen Total	Report	Report	#/Day					Weekly	Grab
Storet No. 00600 Mon. Site No. G-002					8.614	13.2	0	Weekly	Grab
					Report*	Report*		Weekly	Grab

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 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	05/12/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

DEC. 2005

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 12/01/05 To: 12/31/05
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Flow												
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.364	0.514	MGD					0	Daily	Metered	
	Permit Requirement	0.738	0.791	MGD						Daily	Metered	
TDS												
Storet No. 00525 Mon. Site No. G-002	Sample Measurement					1280	1470	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Chlorides												
Storet No. 00940 Mon. Site No. G-002	Sample Measurement					237.5	260	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Nitrates												
Storet No. 00620 Mon. Site No. G-002	Sample Measurement					9.6375	13.2	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	
Nitrates, Calculate and Report												
Storet No. NA Mon. Site No. G-002	Sample Measurement	28.59	43.18	#/Day					0	Weekly	Grab	
	Permit Requirement	Report	Report	#/Day						Weekly	Grab	
Nitrogen Total												
Storet No. 00600 Mon. Site No. G-002	Sample Measurement					14.8525	17.8	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	06/01/15
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

Please read instructions before completing this form.

[illegible]

JAN. 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 01/01/06 To: 01/31/06
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.136	0.522	MGD					0	Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002	0.738	0.791	MGD					0	Daily	Metered
Chlorides										
Storet No. 00940 Mon. Site No. G-002					917	1080	mg/l	0	2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					230.5	276	mg/l	0	2/Month	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002					4.9375	9.9	mg/l	0	Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					7.3425	16.6	mg/l	0	Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	06/02/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

ADDITIONAL SHEET 1

[illegible]

FEB. 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 2/01/06 To: 2/28/06
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units		Min.	Avg.	Max.			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.098	0.355	MGD					0	Daily	Metered
TDS	0.733	0.791	MGD						Daily	Metered
Storet No. 00525 Mon. Site No. G-002						1350	1640	0	2/Month	Grab
Chlorides									2/Month	Grab
Storet No. 00940 Mon. Site No. G-002						271.5	344	0	2/Month	Grab
Nitrates									2/Month	Grab
Storet No. 00620 Mon. Site No. G-002						4.965	11	0	Weekly	Grab
Nitrates, Calculate and Report									Weekly	Grab
Storet No. NA Mon. Site No. G-002	5.16	13.88	#/Day					0	Weekly	Grab
Nitrogen Total									Weekly	Grab
Storet No. 00600 Mon. Site No. G-002						6.545	14.5	0	Weekly	Grab
									Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Richard E. Stephens / Power Plant Engineer		(407) 933-7777 x 7232	06/03/15
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

Please read instructions before completing this form.

[illegible]

MARCH 2006

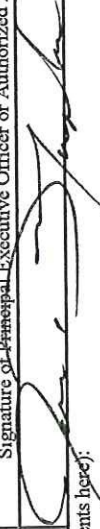
WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 3/01/06 To: 03/31/06
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.420	0.681	MGD					0	Daily	Metered
	0.738	0.791	MGD						Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002					1570	1570	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002					265.5	310	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					4.778	7.01	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	15.52	20.83	#/Day					0	Weekly	Grab
	Report	Report	#/Day						Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					8.502	11.2	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joseph Murphy / Power Plant Engineer		(407) 933-7777 x 7232	06/04/15
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

APRIL 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767

PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742

Attn.: James C. Welsh, President

FACILITY: KUA/ Cane Island Power Plant

LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City

COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site

PERMIT NUMBER: FLA010961

MONITORING PERIOD-From: 4/1/06

LIMIT: Final

CLASS SIZE: NA

FACILITY ID: FLA010961

GMS ID NO. 3049M06279

DISCHARGE POINT NUMBER: G-002

PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.442	0.751	MGD					0	Daily	Metered
	0.738	0.791	MGD						Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002					860	1340	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002					144.75	210	mg/l	0	2/Month	Grab
					Report	Report	mg/l		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					3.4575	5.05	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	12.21	20.52	#/Day					0	Weekly	Grab
	Report	Report	#/Day						Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					6.4675	9.33	mg/l	0	Weekly	Grab
					Report*	Report*	mg/l		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average. I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joseph Murphy / Power Plant Engineer		(407) 933-7777 x 7232	05/15/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
3319 Maguire Blvd. Orlando, FL 32803-3767

PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 5/01/06 To: 05/31/06
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961 GROUP: IW
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Flow		Sample Measurement	0.442	0.742	MGD							
Storet No. 50053	Mon. Site No. G-002	Permit Requirement	0.738	0.791	MGD				0	Daily	Metered	
TDS		Sample Measurement								Daily	Metered	
Storet No. 00525	Mon. Site No. G-002	Permit Requirement				1241	1510	mg/l	0	2/Month	Grab	
Chlorides		Sample Measurement								2/Month	Grab	
Storet No. 00940	Mon. Site No. G-002	Permit Requirement				186	188	mg/l	0	2/Month	Grab	
Nitrates		Sample Measurement								2/Month	Grab	
Storet No. 00620	Mon. Site No. G-002	Permit Requirement				4.112	5.86	mg/l	0	Weekly	Grab	
Nitrates, Calculate and Report		Sample Measurement	15.48	31.47	#/Day					Weekly	Grab	
Storet No. NA	Mon. Site No. G-002	Permit Requirement								Weekly	Grab	
Nitrogen Total		Sample Measurement								Weekly	Grab	
Storet No. 00600	Mon. Site No. G-002	Permit Requirement				6.41	9.57	mg/l	0	Weekly	Grab	

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)

Signature of Principal Executive Officer or Authorized Agent

Telephone No. (include area code) _____

Date (vv/mm/dd)

Joseph Murphy / Power Plant Engineer

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

JUNE 2006

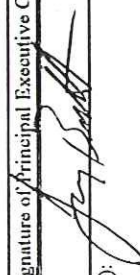
WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
Attn: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 6/1/06
Limit: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: 1W
WAPR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002									
TDS									
Storet No. 00525 Mon. Site No. G-002									
Chlorides									
Storet No. 00940 Mon. Site No. G-002									
Nitrates									
Storet No. 00620 Mon. Site No. G-002									
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002									
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002									

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Jay Butters / Operation and Maintenance Supervisor		(407) 933-7777 x 7209	7/15/06

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

July 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Site 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 7/01/06 To: 07/31/06
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	Sample									
	Measurement	0.466	0.594	MGD						
TDS	Permit Requirement	0.733	0.791	MGD				0	Daily	Metered
	Sample								Daily	Metered
Storet No. 00525 Mon. Site No. G-002	Sample									
	Measurement				805	958	mg/l	0	2/Month	Grab
Chlorides	Permit Requirement				Report	Report	mg/l		2/Month	Grab
	Sample									
Storet No. 00940 Mon. Site No. G-002	Sample									
	Measurement				110.85	123	mg/l	0	2/Month	Grab
Nitrates	Permit Requirement				Report	Report	mg/l		2/Month	Grab
	Sample									
Storet No. 00620 Mon. Site No. G-002	Sample									
	Measurement				2.28	3.45	mg/l	0	Weekly	Grab
Nitrates, Calculate and Report	Permit Requirement				Report	Report	mg/l		Weekly	Grab
	Sample									
Storet No. NA Mon. Site No. G-002	Sample									
	Measurement	8.56	19.06	#/Day				0	Weekly	Grab
Nitrogen Total	Permit Requirement	Report	Report	#/Day					Weekly	Grab
	Sample									
Storet No. 00600 Mon. Site No. G-002	Sample									
	Measurement				16.166	50.7	mg/l	0	Weekly	Grab
	Permit Requirement				Report	Report	mg/l		Weekly	Grab
	Sample									

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 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Jay Butters / Operation and Maintenance Supervisor		(407) 933-7777 x 7209	8/10/2006
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Nitrogen (Total), Calculate and Report										
Storet No. NA	Mon. Site No. G-002	69.16	203.21	#/Day				0	Weekly	Grab
Sodium									Weekly	Grab
Storet No. 00929	Mon. Site No. G-002					246.5	375	0	2/Month	Grab
Sulfates									2/Month	Grab
Storet No. 00945	Mon. Site No. G-002					187.5	195	0	2/Month	Grab
Florida Pro									2/Month	Grab
Storet No. 31666	Mon. Site No. G-002							0	Weekly	Grab
pH									Weekly	Grab
Storet No. 00400	Mon. Site No. G-002					0.1292	0.229	0	Weekly	Grab
Storet No.									Weekly	Grab
Storet No.	Mon. Site No.								Weekly	Grab
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Storet No.	Mon. Site No.									

July 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767

Industrial Wastewater, Ste 200B
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742

Attn.: James C. Welsh, President

FACILITY: KUA/ Cane Island Power Plant

LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Please read instructions before completing this form.

Sampling port on discharge line to the force main to the Imperial site

PERMIT NUMBER: FLA010961

MONITORING PERIOD-From: 8/01/06

LIMIT: Final

CLASS SIZE:NA

FACILITY ID: FLA010961

GMS ID NO. 3049M06279

DISCHARGE POINT NUMBER: G-002

PLANT SIZE/TREATMENT TYPE: NA

To: 08/31/06

GROUP: IW

WAFR SITE NO. 6235

Parameter	Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Flow	Sample Measurement	0.488	0.632	MGID					0	Daily	Metered
Storet No. 50053 Mon. Site No. G-002	Permit Requirement	0.738	0.791	MGID						Daily	Metered
TDS	Sample Measurement					1635	1660	mg/l	0	2/Month	Grab
Storet No. 00525 Mon. Site No. G-002	Permit Requirement					Report	Report	mg/l		2/Month	Grab
Chlorides	Sample Measurement					191	214	mg/l	0	2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Permit Requirement					Report	Report	mg/l		2/Month	Grab
Nitrates	Sample Measurement					3.652	4.36	mg/l	0	Weekly	Grab
Storet No. 00620 Mon. Site No. G-002	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	14.79	28.13	#/Day					0	Weekly	Grab
Storet No. NA Mon. Site No. G-002	Permit Requirement	Report	Report	#/Day						Weekly	Grab
Nitrogen Total	Sample Measurement					8.436	10.5	mg/l	0	Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)

Signature of Principal Executive Officer or Authorized Agent

Telephone No. (include area code)	Date (yy/mm/dd)
-----------------------------------	-----------------

Jay Butters / Operation and Maintenance Supervisor

(407) 933-7777 x 7209

9/11/2006

Please read instructions before completing this form.

[illegible]

SEPT. 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 9/01/06 To: 9/30/06
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	Sample								
	Measurement	0.443	0.623	MGD			0	Daily	Metered
TDS	Sample								
	Measurement	0.738	0.794	MGD				Daily	Metered
Storet No. 00525 Mon. Site No. G-002	Sample								
	Measurement				1535	1570	0	2/Month	Grab
Chlorides	Sample								
	Measurement				Report	Report		2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Sample								
	Measurement				260.5	266	0	2/Month	Grab
Nitrates	Sample								
	Measurement				Report	Report		2/Month	Grab
Storet No. 00620 Mon. Site No. G-002	Sample								
	Measurement				6.84	11.2	0	Weekly	Grab
Nitrates, Calculate and Report	Sample								
	Measurement				Report*	Report*		Weekly	Grab
Storet No. NA Mon. Site No. G-002	Sample								
	Measurement	24.20	57.25	#/Day			0	Weekly	Grab
Nitrogen Total	Sample								
	Measurement	Report	Report	#/Day				Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Sample								
	Measurement				12.6075	20.6	0	Weekly	Grab
	Sample								
	Measurement				Report*	Report*		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Jay Butters / Operation and Maintenance Supervisor		(407) 933-7777 x 7209	10/15/2006

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

OCT. 2006

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 10/01/06 To: 10/31/06
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.553	0.770	MGD					0	Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002					1285	1510	mg/l	0	2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002					183.5	206	mg/l	0	2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					6.14	7.12	mg/l	0	Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	28.36	58.09	#/Day					0	Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					10.222	11.2	mg/l	0	Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Jay Butters / Operation and Maintenance Supervisor		(407) 933-7777 x 7209	11/15/2006

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

[illegible]

Nov. 2006

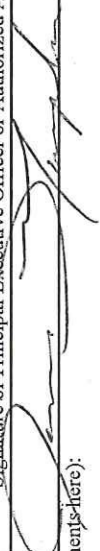
WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 11/01/06 To: 11/30/06
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	0.256	0.677	MGD				0	Daily	Metered
	0.733	0.791	MGD					Daily	Metered
TDS									
Storet No. 00525 Mon. Site No. G-002					809	1230	0	2/Month	Grab
					Report	Report		2/Month	Grab
Chlorides									
Storet No. 00940 Mon. Site No. G-002					149.5	225	0	2/Month	Grab
					Report	Report		2/Month	Grab
Nitrates									
Storet No. 00620 Mon. Site No. G-002					2.72844	5.07	0	Weekly	Grab
					Report	Report		Weekly	Grab
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002	6.02	14.93	#/Day				0	Weekly	Grab
	Report	Report	#/Day					Weekly	Grab
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002					8.45	10.5	0	Weekly	Grab
					Report	Report		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average. I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joe Murphy / Shift Supervisor		(407) 933-7777 x 7210	12/15/2006

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn: James C. Walsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 12/01/06 To: 12/31/06
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE

Please read instructions before completing this form.

[illegible]

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joe Murphy / Shift Supervisor		(407) 933-7777 x 7210	1/15/2007

DEC. 2006

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units		Min.	Avg.	Max.	Units			
Nitrogen (Total), Calculate and Report	Storet No. NA Mon. Site No. G-002	Sample Measurement	6.29	19.64	#/Day					0	Weekly	Grab
		Permit Requirement	Report	Report	#/Day							
		Sample Measurement										
Sodium	Storet No. 00929 Mon. Site No. G-002	Permit Requirement					20.515	36.9	mg/l	0	2/Month	Grab
		Sample Measurement					Report	Report	mg/l			
		Permit Requirement										
Sulfates	Storet No. 00945 Mon. Site No. G-002	Sample Measurement					26.91	48.4	mg/l	0	2/Month	Grab
		Permit Requirement					Report	Report	mg/l			
		Sample Measurement										
Florida Pro	Storet No. 31666 Mon. Site No. G-002	Permit Requirement					0.17475	0.641	mg/l	0	Weekly	Grab
		Sample Measurement					Report	Report	mg/l			
		Permit Requirement										
pH	Storet No. 00400 Mon. Site No. G-002	Sample Measurement				7.39	7.57	7.9	SU	0	2/Month	Grab
		Permit Requirement					6.9	8.5	SU			
		Sample Measurement										
Storet No.	Mon. Site No.	Permit Requirement										
		Sample Measurement										
		Permit Requirement										
Storet No.	Mon. Site No.	Sample Measurement										
		Permit Requirement										
		Sample Measurement										
Storet No.	Mon. Site No.	Permit Requirement										
		Sample Measurement										
		Permit Requirement										
Storet No.	Mon. Site No.	Sample Measurement										
		Permit Requirement										
		Sample Measurement										

JAN. 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD: From: 01/01/07 To: 01/31/07
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Sample Type	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow										
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.336	0.541	MGD				0	Daily	Metered
	Permit Requirement	0.733	0.794	MGD					Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002	Sample Measurement					1071	1150	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002	Sample Measurement					190.5	206	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002	Sample Measurement					3.88	6.28	0	Weekly	Grab
	Permit Requirement					Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	Sample Measurement	9.28	21.50	#/Day				0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002	Sample Measurement					11.192	15	0	Weekly	Grab
	Permit Requirement					Report*	Report*		Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joe Murphy / Shift Supervisor		(407) 933-7777 x 7210	2/15/2007

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Nitrogen (Total), Calculate and Report		Sample Measurement	32.56	58.44	#/Day				Weekly	Grab
Storet No. NA	Mon. Site No. G-002	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Sodium		Sample Measurement								
Storet No. 00929	Mon. Site No. G-002	Permit Requirement							2/Month	Grab
		Sample Measurement				78.905	156	0	2/Month	Grab
Sulfates		Permit Requirement				Report	Report		2/Month	Grab
Storet No. 00945	Mon. Site No. G-002	Sample Measurement							2/Month	Grab
		Permit Requirement				328.5	398	0	2/Month	Grab
Florida Pro		Sample Measurement								
Storet No. 31666	Mon. Site No. G-002	Permit Requirement							Weekly	Grab
		Sample Measurement				0.1354	0.433	0	Weekly	Grab
pH		Permit Requirement				Report	Report		Weekly	Grab
Storet No. 00400	Mon. Site No. G-002	Sample Measurement								
		Permit Requirement				7.02	7.36	0	2/Month	Grab
Storet No.	Mon. Site No.	Sample Measurement				6.0	8.5		2/Month	Grab
		Permit Requirement								
Storet No.	Mon. Site No.	Sample Measurement								
		Permit Requirement								
Storet No.	Mon. Site No.	Sample Measurement								
		Permit Requirement								
Storet No.	Mon. Site No.	Sample Measurement								
		Permit Requirement								

Feb. 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Site 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961

MONITORING PERIOD: From: 2/01/07 To: 2/28/07
 LIMIT: Final

CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279

DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units		Min.	Avg.	Max.			
Flow										
Storet No. 50053 Mon. Site No. G-002										
Sample Measurement	0.392	0.678	MGD							
Permit Requirement	0.733	0.754	MGD					0	Daily	Metered
TDS										
Sample Measurement										
Permit Requirement										
Storet No. 00525 Mon. Site No. G-002										
Sample Measurement						1277	1590	0	2/Month	Grab
Permit Requirement						Report	Report		2/Month	Grab
Chlorides										
Sample Measurement										
Permit Requirement										
Storet No. 00940 Mon. Site No. G-002										
Sample Measurement						229	312	0	2/Month	Grab
Permit Requirement						Report	Report		2/Month	Grab
Nitrates										
Sample Measurement										
Permit Requirement										
Storet No. 00620 Mon. Site No. G-002										
Sample Measurement						9.77	24	0	Weekly	Grab
Permit Requirement						Report	Report		Weekly	Grab
Nitrates, Calculate and Report										
Sample Measurement	38.66	89.65	#/Day							
Permit Requirement	Report	Report	#/Day					0	Weekly	Grab
Storet No. NA Mon. Site No. G-002										
Sample Measurement										
Permit Requirement										
Nitrogen Total										
Sample Measurement						19.415	37	0	Weekly	Grab
Permit Requirement						Report	Report		Weekly	Grab
Storet No. 00600 Mon. Site No. G-002										
Sample Measurement										
Permit Requirement										

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 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print) _____ Signature of Principal Executive Officer or Authorized Agent _____ Telephone No. (include area code) _____ Date (yy/mm/dd) _____
 Joseph Murphy, Shift Supervisor (407) 933-7777 x 7232 07/03/15
 COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Facility ID 3049M06279 Discharge Point # G-002

FEB. 2007

[illegible]

MARCH 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 3/01/07 To: 03/31/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

GROUP: 1W

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	0.259	0.668	MGD				0	Daily	Metered
TDS	0.733	0.791	MGD					Daily	Metered
Storet No. 00525 Mon. Site No. G-002					811	1390	0	2/Month	Grab
Chlorides					Report	Report		2/Month	Grab
Storet No. 00940 Mon. Site No. G-002					151.05	261	0	2/Month	Grab
Nitrates					Report	Report		2/Month	Grab
Storet No. 00620 Mon. Site No. G-002					3.6023	8.38	0	Weekly	Grab
Nitrates, Calculate and Report					Report*	Report*		Weekly	Grab
Storet No. NA Mon. Site No. G-002	7.20	30.93	#/Day				0	Weekly	Grab
Nitrogen Total								Weekly	Grab
Storet No. 00600 Mon. Site No. G-002					5.8085	15.4	0	Weekly	Grab
					Report*	Report*		Weekly	Grab

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joseph Murphy / Power Plant Engineer		(407) 933-7777 x 7232	07/04/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

APRIL 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767

PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742

Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 4/1/07 To: 4/30/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

GROUP: 1W
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	0.433	0.687	MGD					0	Daily	Metered
Permit Requirement	0.733	0.794	MGD						Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002					1440	1530	mg/l	0	2/Month	Grab
Permit Requirement					Report	Report	mg/l		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002					120.915	239	mg/l	0	2/Month	Grab
Permit Requirement					Report	Report	mg/l		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002					10.055	12.2	mg/l	0	Weekly	Grab
Permit Requirement					Report*	Report*	mg/l		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	35.32	61.64	#/Day					0	Weekly	Grab
Permit Requirement	Report	Report	#/Day						Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002					12.315	17.9	mg/l	0	Weekly	Grab
Permit Requirement					Report*	Report*	mg/l		Weekly	Grab

*There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joseph Murphy / Shift Supervisor		(407) 933-7777 x 7232	07/05/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

MAY 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 5/01/07 To: 05/31/07
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Sample Measurement	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow	Sample Measurement	0.337	0.788	MGD				0	Daily	Metered
Storet No. 50033 Mon. Site No. G-002	Permit Requirement	0.738	0.794	MGD						
TDS	Sample Measurement									
Storet No. 00525 Mon. Site No. G-002	Permit Requirement					1310	1330	0	2/Month	Grab
Chlorides	Sample Measurement									
Storet No. 00940 Mon. Site No. G-002	Permit Requirement					169.5	232	0	2/Month	Grab
Nitrates	Sample Measurement									
Storet No. 00620 Mon. Site No. G-002	Permit Requirement					5.999	10.7	0	Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	22.64	50.21	#/Day						
Storet No. NA Mon. Site No. G-002	Permit Requirement									
Nitrogen Total	Sample Measurement									
Storet No. 00600 Mon. Site No. G-002	Permit Requirement					8.382	13.8	0	Weekly	Grab

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Joseph Murphy / Shift Supervisor		(407) 933-7777 x 7232	07/06/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

[illegible]

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767

PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742

Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

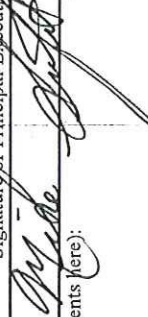
Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 6/1/07 To: 6/30/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA

- GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow	Sample Measurement	0.584	0.771	MGD				0	Daily	Metered
	Permit Requirement	0.733	0.791	MGD					Daily	Metered
TDS	Sample Measurement					1375	1450	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Chlorides	Sample Measurement					258.5	271	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Nitrates	Sample Measurement					6.955	10.6	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab
Nitrates, Calculate and Report	Sample Measurement	31.30	120.97	#/Day				0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Nitrogen Total	Sample Measurement					9.6225	13.5	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Sample Measurement									
	Permit Requirement									

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert / Lead Engineer		(407) 933-7777 x 7209	07/07/15

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Discharge Point # G-002

June 2007

[illegible]

July 2007

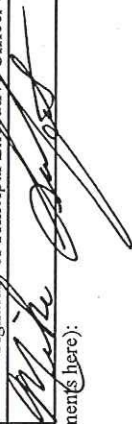
WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 7/01/07 To: 07/31/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units		Min.	Avg.	Max.	Units			
Flow											
Storet No. 50053 Mon. Site No. G-002	0.540	0.704	MGD						0	Daily	Metered
TDS	0.733	0.791	MGD							Daily	Metered
Storet No. 00525 Mon. Site No. G-002									0	2/Month	Grab
Chlorides										2/Month	Grab
Storet No. 00940 Mon. Site No. G-002									0	2/Month	Grab
Nitrates										2/Month	Grab
Storet No. 00620 Mon. Site No. G-002									0	Weekly	Grab
Nitrates, Calculate and Report										Weekly	Grab
Storet No. NA Mon. Site No. G-002									0	Weekly	Grab
Nitrogen Total										Weekly	Grab
Storet No. 00600 Mon. Site No. G-002									0	Weekly	Grab
										Weekly	Grab

* There shall be no net-increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert, Lead Engineer		(407) 933-7777 x 7204	07/08/13

COMMENT/AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Nitrogen (Total), Calculate and Report												
Storet No. NA	Mon. Site No. G-002	28.82	52.05	#/Day					0	Weekly	Grab	
Sodium												
Storet No. 00929	Mon. Site No. G-002					169.5	199	mg/l	0	2/Month	Grab	
Sulfates												
Storet No. 00945	Mon. Site No. G-002					309.5	408	mg/l	0	2/Month	Grab	
Florida Pro												
Storet No. 31666	Mon. Site No. G-002					0.209	0.317	mg/l	0	Weekly	Grab	
pH												
Storet No. 00400	Mon. Site No. G-002				6.88	7.26	7.45	SU	0	2/Month	Grab	
Storet No. Mon. Site No.												
Storet No. Mon. Site No.												
Storet No. Mon. Site No.												
Storet No. Mon. Site No.												
Storet No. Mon. Site No.												

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
3319 Maguire Blvd. Orlando, FL 32803-3767
Industrial Wastewater, Ste 200B
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 8/01/07 To: 08/31/07
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Flow												
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.535	0.726	MGD					0	Daily	Metered	
	Permit Requirement	0.738	0.794	MGD						Daily	Metered	
TDS												
Storet No. 00525 Mon. Site No. G-002	Sample Measurement					1190	1510	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Chlorides												
Storet No. 00940 Mon. Site No. G-002	Sample Measurement					166.3	314	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Nitrates												
Storet No. 00620 Mon. Site No. G-002	Sample Measurement					5.648	7.95	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	
Nitrates, Calculate and Report												
Storet No. NA Mon. Site No. G-002	Sample Measurement	23.78	64.24	#/Day					0	Weekly	Grab	
	Permit Requirement	Report	Report	#/Day						Weekly	Grab	
Nitrogen Total												
Storet No. 00600 Mon. Site No. G-002	Sample Measurement					8.772	11	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)

Signature of Principal Executive Officer/for Authorized Agent

Telephone No. (include area code)	Date (yy/mm/dd)
-----------------------------------	-----------------

Mike Siefert, Power Plant Lead Engineer

(407) 933-7777 x 7204

9/15/2007

SEPT 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742

Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 9/01/07 To: 9/30/07
LIMIT: Final

CLASS SIZE: NA

FACILITY ID: FLA010961

GMS ID NO. 3049M06279

DISCHARGE POINT NUMBER: G-002

PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow										
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.408	0.625	MGD				0	Daily	Metered
	Permit Requirement	0.733	0.794	MGD					Daily	Metered
TDS										
Storet No. 00525 Mon. Site No. G-002	Sample Measurement					824	1490	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Chlorides										
Storet No. 00940 Mon. Site No. G-002	Sample Measurement					150	280	0	2/Month	Grab
	Permit Requirement					Report	Report		2/Month	Grab
Nitrates										
Storet No. 00620 Mon. Site No. G-002	Sample Measurement					8.2706	15	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab
Nitrates, Calculate and Report										
Storet No. NA Mon. Site No. G-002	Sample Measurement	27.20	55.47	#/Day				0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day					Weekly	Grab
Nitrogen Total										
Storet No. 00600 Mon. Site No. G-002	Sample Measurement					10.554	17.1	0	Weekly	Grab
	Permit Requirement					Report	Report		Weekly	Grab

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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert, Power Plant Lead Engineer	<i>Mike Siefert</i>	(407) 933-7777 x 7204	07/10/17
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

SEPT. 2007

[illegible]

0ct. 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

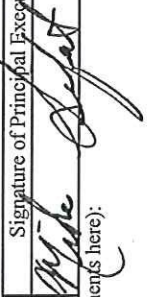
Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 10/01/07 To: 10/31/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.	Units			
Flow										
Storet No. 50053 Mon. Site No. G-002	Sample									
	Measurement	0.445	MGD					0	Daily	Metered
TDS	Permit	0.738	MGD						Daily	Metered
	Requirement									
Storet No. 00525 Mon. Site No. G-002	Sample				1160	1290	mg/l	0	2/Month	Grab
	Measurement				Report	Report			2/Month	Grab
Chlorides	Permit									
	Requirement									
Storet No. 00940 Mon. Site No. G-002	Sample				425.5	572	mg/l	0	2/Month	Grab
	Measurement				Report	Report			2/Month	Grab
Nitrates	Permit									
	Requirement									
Storet No. 00620 Mon. Site No. G-002	Sample				8.1056	19.8	mg/l	0	Weekly	Grab
	Measurement				Report*	Report*			Weekly	Grab
Nitrates, Calculate and Report	Permit									
	Requirement									
Storet No. NA Mon. Site No. G-002	Sample	34.53	#/Day					0	Weekly	Grab
	Measurement	Report	Report						Weekly	Grab
Nitrogen Total	Permit									
	Requirement									
Storet No. 00600 Mon. Site No. G-002	Sample				15.518	28	mg/l	0	Weekly	Grab
	Measurement				Report*	Report*			Weekly	Grab
	Permit									
	Requirement									

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert, Power Plant Lead Engineer		(407) 933-7777 x 7204	07/11/20

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Oct. 2007

[illegible]

Nov. 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 11/01/07 To: 11/30/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	Sample								
	Measurement	0.302	0.541	MGD			0	Daily	Metered
TDS	Permit Requirement	0.738	0.791	MGD				Daily	Metered
	Sample								
Storet No. 00525 Mon. Site No. G-002	Measurement				1360	1430	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Chlorides	Sample								
	Measurement				241.5	244	0	2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Permit Requirement				Report	Report		2/Month	Grab
	Sample								
Nitrates	Measurement				9.068	11.1	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab
Storet No. 00620 Mon. Site No. G-002	Sample								
	Measurement	22.41	96.98	#/Day			0	Weekly	Grab
Nitrates, Calculate and Report	Permit Requirement	Report	Report	#/Day				Weekly	Grab
	Sample								
Storet No. NA Mon. Site No. G-002	Measurement								
	Permit Requirement								
Nitrogen Total	Sample								
	Measurement				14.5	22	0	Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Permit Requirement				Report*	Report*		Weekly	Grab
	Sample								

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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert, Power Plant Lead Engineer	<i>Mike Siefert</i>	(407) 933-7777 x 7204	07/12/17

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Dec. 2007

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 12/01/07 To: 12/31/07
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	0.250	0.576	MGD				0	Daily	Metered
TDS	0.738	0.791	MGD					Daily	Metered
Storet No. 00525 Mon. Site No. G-002				1350	Report	1460	0	2/Month	Grab
Chlorides								2/Month	Grab
Storet No. 00940 Mon. Site No. G-002				369.5	Report	407	0	2/Month	Grab
Nitrates								2/Month	Grab
Storet No. 00620 Mon. Site No. G-002				5.3788	Report	13	0	Weekly	Grab
Nitrates, Calculate and Report								Weekly	Grab
Storet No. NA Mon. Site No. G-002	6.76	37.91	#/Day				0	Weekly	Grab
Nitrogen Total								Weekly	Grab
Storet No. 00600 Mon. Site No. G-002				7.062	Report	17.2	0	Weekly	Grab
								Weekly	Grab

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Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert, Power Plant Lead Engineer	<i>Mike Siefert</i>	(407) 933-7777 x 7204	08/01/10
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

Please read instructions before completing this form.

[illegible]

JAN. 2008

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Ste 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 01/01/08 To: 01/31/08
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA
 GROUP: IW
 WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
Flow												
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.324	0.547	MGD					0	Daily	Metered	
	Permit Requirement	0.738	0.791	MGD						Daily	Metered	
TDS												
Storet No. 00525 Mon. Site No. G-002	Sample Measurement					1014	1540	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Chlorides												
Storet No. 00940 Mon. Site No. G-002	Sample Measurement					302	368	mg/l	0	2/Month	Grab	
	Permit Requirement					Report	Report	mg/l		2/Month	Grab	
Nitrates												
Storet No. 00620 Mon. Site No. G-002	Sample Measurement					2.59384	5.77	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	
Nitrates, Calculate and Report												
Storet No. NA Mon. Site No. G-002	Sample Measurement	7.17	17.72	#/Day					0	Weekly	Grab	
	Permit Requirement	Report	Report	#/Day						Weekly	Grab	
Nitrogen Total												
Storet No. 00600 Mon. Site No. G-002	Sample Measurement					5.062	9.59	mg/l	0	Weekly	Grab	
	Permit Requirement					Report*	Report*	mg/l		Weekly	Grab	

* There shall be no net increase of Total Nitrogen or Nitrate Nitrogen over the combined influent streams in pounds per day on an annual average.
 I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert/Lead Engineer	<i>Mike Siefert</i>	(407) 933-7777 x 7204	08/02/12

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 Please note the letter of explanation from Test America regarding holding times exceeded for Week #3 Nitrite/Nitrate Testing.

Apr. 2008

[illegible]

FEB. 2008

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
 Industrial Wastewater, Site 200B
 3319 Maguire Blvd. Orlando, FL 32803-3767
 PERMITTEE NAME: Kissimmee Utility Authority
 MAILING ADDRESS: P.O. Box 423219
 Kissimmee, FL 34742
 Attn.: James C. Welsh, President
 FACILITY: KUA/ Cane Island Power Plant
 LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
 COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
 PERMIT NUMBER: FLA010961
 MONITORING PERIOD-From: 02/01/08 To: 02/29/08
 LIMIT: Final
 CLASS SIZE: NA
 FACILITY ID: FLA010961
 GMS ID NO. 3049M06279
 DISCHARGE POINT NUMBER: G-002
 PLANT SIZE/TREATMENT TYPE: NA

GROUP: IW

WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Sample Measurement Permit Requirement	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.			
Flow	Sample	0.375	0.554	MGD				0	Daily	Metered
Storet No. 50053 Mon. Site No. G-002	Measurement	0.738	0.791	MGD					Daily	Metered
TDS	Sample							0	2/Month	Grab
Storet No. 00525 Mon. Site No. G-002	Measurement					1270	1530		2/Month	Grab
Chlorides	Sample					Report	Report		2/Month	Grab
Storet No. 00940 Mon. Site No. G-002	Measurement					242.5	258	0	2/Month	Grab
Nitrates	Sample					Report	Report		2/Month	Grab
Storet No. 00620 Mon. Site No. G-002	Measurement					3.1272	5.57	0	Weekly	Grab
Nitrates, Calculate and Report	Sample					Report*	Report*		Weekly	Grab
Storet No. NA Mon. Site No. G-002	Measurement	9.84	15.72	#/Day				0	Weekly	Grab
Nitrogen Total	Sample								Weekly	Grab
Storet No. 00600 Mon. Site No. G-002	Measurement					7.276	14.2	0	Weekly	Grab
	Permit					Report*	Report*		Weekly	Grab
	Requirement									

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert/Lead Engineer		(407) 933-7777 x 7204	08/03/12

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):

Please read instructions before completing this form.

Parameter		Quantity or Loading				Quality or Concentration				No. Ex.	Frequency of Analysis	Sample Type
		Avg.	Max.	Units	Min.	Avg.	Max.	Units				
(Nitrogen (Total), Calculate and Report	Storet No. NA	22.76	48.31	#/Day					0	Weekly	Grab	
		Report	Report	#/Day						Weekly	Grab	
Sodium	Storet No. 00929					216.5	243	mg/l	0	2/Month	Grab	
						Report	Report	mg/l		2/Month	Grab	
Sulfates	Storet No. 00945					477.5	505	mg/l	0	2/Month	Grab	
						Report	Report	mg/l		2/Month	Grab	
Florida Pro	Storet No. 31666					0.17725	0.475	mg/l	0	Weekly	Grab	
						Report	Report	mg/l		Weekly	Grab	
pH	Storet No. 00400				6.93	7.42	8.2	SU	0	2/Month	Grab	
					6.0		8.5	SU		2/Month	Grab	
Storet No.	Mon. Site No.											
Storet No.	Mon. Site No.											
Storet No.	Mon. Site No.											
Storet No.	Mon. Site No.											

MARCH 2008

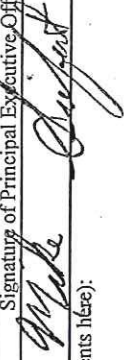
WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Ste 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 03/01/08 To: 03/31/08
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO: 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow									
Storet No. 50053 Mon. Site No. G-002	Sample Measurement	0.415	1.511	MGD			0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD				Daily	Metered
TDS									
Storet No. 00525 Mon. Site No. G-002	Sample Measurement				1390	1480	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Chlorides									
Storet No. 00940 Mon. Site No. G-002	Sample Measurement				294.5	323	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Nitrates									
Storet No. 00620 Mon. Site No. G-002	Sample Measurement				6.156	7	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report									
Storet No. NA Mon. Site No. G-002	Sample Measurement	0.02	0.03	#/Day			0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Nitrogen Total									
Storet No. 00600 Mon. Site No. G-002	Sample Measurement				11.958	19.4	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert/Lead Engineer		(407) 933-7777 x 7204	08/04/11
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here): One pH excursion on March 5, 2008.			

Please read instructions before completing this form.

[illegible]

APRIL 2008

WHEN COMPLETED MAIL THIS REPORT TO: Department of Environmental Protection Central District
Industrial Wastewater, Site 200B
3319 Maguire Blvd. Orlando, FL 32803-3767
PERMITTEE NAME: Kissimmee Utility Authority
MAILING ADDRESS: P.O. Box 423219
Kissimmee, FL 34742
Attn.: James C. Welsh, President
FACILITY: KUA/ Cane Island Power Plant
LOCATION: 6075 Old Tampa Hwy, 1.5 miles NW of Intercession City
COUNTY: Osceola

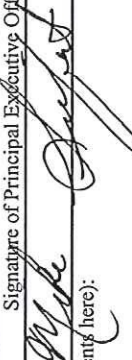
Sampling port on discharge line to the force main to the Imperial site
PERMIT NUMBER: FLA010961
MONITORING PERIOD-From: 04/01/08 To: 04/30/08
LIMIT: Final
CLASS SIZE: NA
FACILITY ID: FLA010961
GMS ID NO. 3049M06279
DISCHARGE POINT NUMBER: G-002
PLANT SIZE/TREATMENT TYPE: NA
GROUP: IW
WAFR SITE NO. 6235

Please read instructions before completing this form.

Parameter	Quantity or Loading			Quality or Concentration			No. Ex.	Frequency of Analysis	Sample Type
	Avg.	Max.	Units	Min.	Avg.	Max.			
Flow	Sample								
	Measurement	0.335	0.567	MGD			0	Daily	Metered
	Permit Requirement	0.738	0.791	MGD				Daily	Metered
TDS	Sample								
	Measurement				1340	1530	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Chlorides	Sample								
	Measurement				266.5	271	0	2/Month	Grab
	Permit Requirement				Report	Report		2/Month	Grab
Nitrates	Sample								
	Measurement				7.708	10.4	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab
Nitrates, Calculate and Report	Sample								
	Measurement	26.17	41.08	#/Day			0	Weekly	Grab
	Permit Requirement	Report	Report	#/Day				Weekly	Grab
Nitrogen Total	Sample								
	Measurement				11.316	15.2	0	Weekly	Grab
	Permit Requirement				Report*	Report*		Weekly	Grab

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I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print)	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Mike Siefert/Lead Engineer		(407) 933-7777 x 7204	08/05/20
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):			

APRIL 2008