



Board of County Commissioners
DEPARTMENT OF PUBLIC WORKS
SOLID WASTE MANAGEMENT DIVISION

P.O. Box 340, Lecanto, Florida 34460
Telephone: (352) 527-7670 FAX: (352) 527-7672
email: landfillinfo@bocc.citrus.fl.us
TDD Telephone 527-5303

Citrus Springs/Dunnellon/Inglis/Yankeetown area Toll Free (352) 489-2120

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JUL 14 2005

Solid Waste Section

July 12, 2005

Mr. John Morris
Environmental Specialist III
Dept. Of Environmental Protection
3804 Coconut Palm Drive
Tampa, Fl 33619-8318

39864

WACS# 39859
4009C0086

**RE: WEEKLY LEACHATE MONITORING REPORT FOR CITRUS COUNTY CENTRAL
LANDFILL 60 AND 80 ACRE SITES - PERMIT NO. 21375-003-SO**

Dear Mr. Morris:

Enclosed please find the following leachate monitoring results for the Citrus County Central Landfill site, together with the Operator's monthly reports covering the quarterly period April, May and June 2005:

- 1) **Weekly effluent analytical results:** There were no exceedances of permit limits for this time period.
- 2) **Quarterly Effluent results:** Forwarded by Jones, Edmunds and Associates under separate cover letter.

Should further information or clarification be necessary, please do not hesitate to contact me.

Sincerely,

Susan J. Metcalfe
Director, Division of
Solid Waste Management

CC: Tom Dick, Assistant Director, Dept. Public Works w/o attachments
Susan Pelz, Department of Environmental Protection w/xls.sheet

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JUL 14 2005

CITRUS COUNTY CENTRAL LANDFILL

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A
 WHEN COMPLETED MAIL THIS REPORT TO: DEPARTMENT OF ENVIRONMENTAL PROTECTION SOUTHWEST DISTRICT
 Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

Solid Waste Section

PERMITTEE NAME: Citrus County Board Of County Commissioners
 MAILING ADDRESS: P.O. Box 340
 Lecanto, FL 34460

PERMIT NUMBER: 21375-003-SO
 WACS FACILITY ID NUMBER: SWD/09/039859
 TEST SITE ID NUMBER: WACS 175
 MONITORING PERIOD:

FACILITY: Central Landfill Leachate Plant
 LOCATION: 230 W. Gulf to Lake Hwy
 Lecanto, FL 34461
 COUNTY: Citrus

From: 4/1 To: 04/30/2005
 CLASS SIZE: 1-C
 REPORT: Quarterly
 GROUP: Solid Waste

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, in conduit or thru treatment plant	Sample Measurement	0.014		MGD						
PARM Code 50053	Permit Requirement	Report Mon. AVG.	.010 (3) Month Rolling Average	MGD					Daily	Metered
C. OD. 5 day 20 degree C	Sample Measurement					1.7				mg/L
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)			Weekly	Grab
Total Suspended Solids	Sample Measurement					2.5				mg/L
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)			Weekly	Grab
Nitrate (as N)	Sample Measurement						1.0			mg/L
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)			Weekly	Grab
pH	Sample Measurement				7.8		8.4			S.U.
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.		Daily	Grab

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, the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Gary Loggins Utility Operator III C/13057	<i>Gary Loggins</i>	(352)527-7670	6-1-05

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 * Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

CITRUS COUNTY CENTRAL LANDFILL

DAILY SAMPLE RESULTS - PART B

Facility: Central Landfill Leachate Plant
 PERMIT NUMBER: 21375-003-SO
 Month/Year: 4/05

Three-month Average Daily Flow: #REF!
 Daily Flow % of Permitted Capacity: 45.5%

Days of the Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Flow (MGD)	0.016	0.025	N/K	0.013	0.013	0.015	0.014	0.026	0.035	N/R	0.016	0.018	0.017	0.015	0.019	0.019	0.011	0.017	0.024	0.000	0.025	0.005	0.008	0.009	0.009	0.014	0.013	0.013	0.006	0.009
CHOD5 Effluent (mg/L as O2) PARM Code 50053						2.9							1.6							1.2							1.2			
TSS Effluent (mg/L) PARM Code 80082						<1							2.5							<1							<1			
Nitrate (as N) (mg/L) PARM Code 071850						0.2							0.1							0.1							1.0			
pH Effluent (standard units) PARM Code 00500	8.1		8.0	8.4	8.2	8.2	8.4	7.9		7.8	8.0	8.1	8.4	8.1	8.4	8.4	8.4	8.1	8.3	8.3	8.2	8.2	8.0	7.9	8.3	8.2	8.1	8.1	8.1	8.0

PLANT STAFFING: Day Shift Operator Class: C Certificate No.: 13667 Name: Gerald Nusbaum
 Evening Shift Operator Class: Certificate No.: Name:
 Night Shift Operator Class: Certificate No.: Name:
 Lead Operator Class: C Certificate No.: 13057 Name: Gary Loggins

Type of Effluent Disposal or Reclaimed Water Reuse: Percc. Pond
 Limited Wet Weather Discharge Activated: No: Yes: Not applicable: X

* Attach additional sheets if necessary to list all certified operators.

CITRUS COUNTY CENTRAL LANDFILL

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A
 WHEN COMPLETED MAIL THIS REPORT TO: DEPARTMENT OF ENVIRONMENTAL PROTECTION SOUTHWEST DISTRICT
 Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

PERMITTEE NAME: Citrus County Board Of County Commissioners
 MAILING ADDRESS: P.O. Box 340
 Lecanto, FL 34460

PERMIT NUMBER: 21375-003-SO
 WACS FACILITY ID NUMBER: SWD/09/039859
 TEST SITE ID NUMBER: WACS 175
 MONITORING PERIOD:

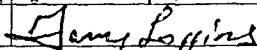
FACILITY: Central Landfill Leachate Plant
 LOCATION: 230 W. Gulf to Lake Hwy
 Lecanto, FL 34461
 COUNTY: Citrus

From: 5/1 To: 05/31/2005
 CLASS SIZE: 1-C
 REPORT: Quarterly
 GROUP: Solid Waste

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, in conduit or thru treatment plant	Sample Measurement	0.010		MGD							
PARM Code 50053	Permit Requirement	Report Mon. AVC.	.030 (3) Month Rolling Average	MGD						Daily	Metered
C OD, 5 day 20 degree C	Sample Measurement					2.3		mg/L			
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Total Suspended Solids	Sample Measurement					<1		mg/L			
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Nitrate (as N)	Sample Measurement						1.6	mg/L			
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		mg/L		Weekly	Grab
pH	Sample Measurement				7.0		8.4	S.U.			
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	S.U.		Daily	Grab

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 the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mn/dd)
Gary Loggins Utility Operator III C/13057		(352)527-7670	05/07/12

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 *Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

CITRUS COUNTY CENTRAL LANDFILL

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A
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 Solid Waste Section, 3805 Coconut Palm Drive Tampa, FL 33619-8218

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 Lecanto, FL 34460

PERMIT NUMBER: 21375-003-SO
 WACS FACILITY ID NUMBER: SWD/09/039859
 TEST SITE ID NUMBER: WACS 175
 MONITORING PERIOD:

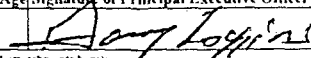
FACILITY: Central Landfill Leachate Plant
 LOCATION: 230 W. Gulf to Lake Hwy
 Lecanto, FL 34461
 COUNTY: Citrus

From: 6/1 To: 06/30/2005
 CLASS SIZE: 1-C
 REPORT: Quarterly
 GROUP: Solid Waste

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, in conduit or thru treatment plant	Sample Measurement	0.008		MGD							
PARM Code 50053	Permit Requirement	Report Mon. AVG.	.030 (3) Month Rolling Average	MGD						Daily	Metered
C OD 5 day 20 degree C	Sample Measurement					2.4		mg/L			
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Total Suspended Solids	Sample Measurement					3.3		mg/L			
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L		Weekly	Grab
Nitrate (as N)	Sample Measurement						2.6	mg/L			
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		mg/L		Weekly	Grab
pH	Sample Measurement				7.5		8.2	S.U.			
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	S.U.		Daily	Grab

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, the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Telephone No. (include area code)	Date (yy/mm/dd)
Gary Loggins Utility Operator III C/13057		(352)527-7670	05/07/12

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

*Rolling Annual Average is the average of the current month's average and the preceding 11 monthly averages.

A-1

CITRUS COUNTY CENTRAL LANDFILL

DAILY SAMPLE RESULTS - PART B

Facility: Central Landfill Leachate Plant
 PERMIT NUMBER: 21375-003-S0
 Month/Year: 6/05

Three-month Average Daily Flow:
 Daily Flow % of Permitted Capacity: 28.0%
 #REF!

Days of the Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Flow (MGD) PARM Code 50053	0.010	0.009	0.008	0.017	N/R	0.002	0.009	0.009	0.009	0.003	0.015	0.009	0.009	0.009	0.009	0.009	0.009	0.009	0.006	0.008	0.009	0.011	0.006	0.013	0.017	N/R	0.008	0.008	0.009	0.009
CBOD ₅ Effluent (mg/L as O ₂) PARM Code 80082	1.1							3.1						2.3								1.6								3.9
TSS Effluent (mg/L) PARM Code 900201	1.5							5.0						<1								<1								<1
Nitrate (as N) (mg/L) PARM Code 071850	1.3							2.6						0.4								<1.0								<1.0
pH Effluent (standard units) PARM Code 00500	7.8	7.7	7.5	7.6		7.7	7.6	7.7	7.8	7.7	8.0	8.0	8.1	8.2	8.1	7.9	7.9	8.0	8.0	7.9	7.8	8.0	7.8	8.0	8.0	7.8	7.5	7.6	7.8	7.9

PLANT STAFFING:

Day Shift Operator	Class: C	Certificate No.: 13667	Name: Gerald Nisbaum
Evening Shift Operator	Class:	Certificate No.:	Name:
Night Shift Operator	Class:	Certificate No.:	Name:
Lead Operator	Class: C	Certificate No.: 14057	Name: Gary Loggins

Type of Effluent Disposal or Reclaimed Water Reuse: Percolation Pond
 Limited Wet Weather Discharge Activated: No; Yes; Not applicable: X

* Attach additional sheets if necessary to list all certified operators.

S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT

RECEIVED
 APR 18 2005
 JUL 14 2005

Client CITRUS COUNTY UTILITIES **Sample Number** E050693 Solid Waste Section
Project LEACHATE PLANT **Date/Time Sampled** 4/6/05 1030 HRS
Sample Description WWTP/EFF **Date/Time Received** 4/6/05 1235 HRS
PO NO 55573 **Invoice Number** 7405
 E05-050693 R17-05-4-1

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.91	0.3 mg/L	AP	3/30/05 1200 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	4/8/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.23	0.10 mg/L	CK	4/7/05 0815 HRS

Sally Ann Carrillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

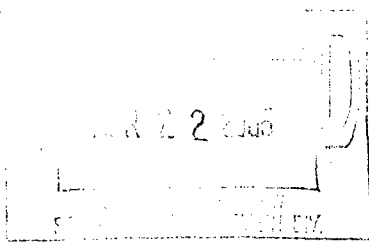
**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

RECEIVED

JUL 14 2005

Client CITRUS COUNTY UTILITIES **Sample Number** E050745 Solid Waste Section
Project LEACHATE PLANT **Date/Time Sampled** 4/13/05 1100 HRS
Sample Description WWTP/EFF **Date/Time Received** 4/13/05 1200 HRS
PO NO 55573 **Invoice Number** 7405
E05-050745 RID=05-4-2

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.56	0.3 mg/L	AP	4/14/05 1300 HRS
SM2540-D	TSS	mg/L	2.5	1.0 mg/L	AP	4/14/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.11	0.10 mg/L	CK	4/14/05 0930 HRS



Sally Ann Carullo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

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JUL 14 2005

Client CITRUS COUNTY UTILITIES **Sample Number** E050844 Solid Waste Section
Project LEACHATE LANDFILL **Date/Time Sampled** 4/20/05 0945 HRS
Project No 55573 **Date/Time Received** 4/20/05 1250 HRS
Sample Description WWTP/INF **Invoice Number** 7405

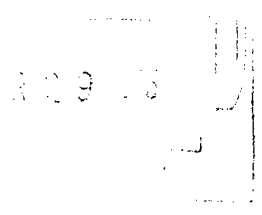
E05-050844 RID = 05-4-3

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	205.0	0.3 mg/L	AP	4/21/05 0730 HRS
SM2540-D	TSS	mg/L	28.0	1.0 mg/L	AP	4/22/05 0900 HRS

E05-050844 RID = 05-4-4
Sample Description WWTP/EFF **Date/Time Sampled** 4/20/05 0945 HRS
Date/Time Received 4/20/05 1250 HRS

Method	Analytes	Units	Results	% Removal MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.22	99.40% 0.3 mg/L	AP	4/21/05 0730 HRS
SM2540-D	TSS	mg/L	<1	100% 1.0 mg/L	AP	4/22/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.11	0.10 mg/L	CK	4/21/05 0900 HRS

AMMONIA
SUB TO
ADVANCED ENVIRONMENTAL LABORATORIES
DHR CERTIFICATION #E84589/E82574



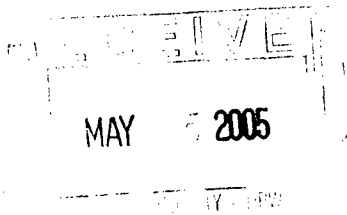
Sally Ann Casullo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

Client CITRUS COUNTY UTILITIES **Sample Number** E050891
Project LEACHATE PLANT **Date/Time Sampled** 4/27/05 0900 HRS
Sample Description WWTP/EFF **Date/Time Received** 4/27/05 1325 HRS
PO NO 55573 **Invoice Number** 7405
E05-050891 RID=05-4-6

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.22	0.3 mg/L	AP	4/27/05 1400 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	4/29/05 0800 HRS
SM4500-NO3-E	NITRATE	mg/L	1.0	0.10 mg/L	CK	4/28/05 0815 HRS



Sally Ann Canillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

Client CITRUS COUNTY UTILITIES **Sample Number** E050917
Project LEACHATE PLANT **Date/Time Sampled** 5/4/05 0917 HRS
Sample Description WWTP/EFF **Date/Time Received** 5/4/05 1150 HRS
PO NO 55573 **Invoice Number** 7462
E05-050917 RID=05-6-1

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.12	0.3 mg/L	AP	5/4/05 1300 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	5/6/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.80	0.10 mg/L	CK	5/4/05 1200 HRS

Sally Ann Carrillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

RECEIVED

JUL 14 2005

Solid Waste Section

Client CITRUS COUNTY UTILITIES **Sample Number** E050967
Project LEACHATE PLANT **Date/Time Sampled** 5/11/05 0900 HRS
Sample Description WWTP/EFF **Date/Time Received** 5/11/05 1215 HRS
PO NO 55573 **Invoice Number** 7462
E05-05967 RID=05-5-2

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.38	0.3 mg/L	AP	5/11/05 1300 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	5/13/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.94	0.10 mg/L	CK	5/12/05 1000 HRS

MAY 20 2005

Sally Ann Cavillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

RECEIVED

JUL 14 2005

Solid Waste Section

Client CITRUS COUNTY UTILITIES **Sample Number** E051009
Project LEACHATE LANDFILL **Date/Time Sampled** 5/18/05 0830 HRS
Project No 55573 **Date/Time Received** 5/18/05 1117 HRS
Sample Description WWTP/INF **Invoice Number** 7462

I05-051009 RID = 05-5-3

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	130.0	0.3 mg/L	AP	5/18/05 1300 HRS
SM2540-D	TSS	mg/L	20.0	1.0 mg/L	AP	5/20/05 0900 HRS

E05-051009 RID = 05-5-4 **Date/Time Sampled** 5/18/05 0830 HRS
Sample Description WWTP/EFF **Date/Time Received** 5/18/05 1117 HRS

Method	Analytes	Units	Results	% Removal MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.10	98.38% 0.3 mg/L	AP	5/18/05 1300 HRS
SM2540-D	TSS	mg/L	<1	100% 1.0 mg/L	AP	5/20/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	1.6	0.10 mg/L	CK	5/19/05 0930 HRS

AMMONIA
SUB TO
ADVANCED ENVIRONMENTAL LABORATORIES
DHRS CERTIFICATION #E84589/E82574

Sally Ann Casillo

Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

Client CITRUS COUNTY UTILITIES **Sample Number** E051067
Project LEACHATE PLANT **Date/Time Sampled** 5/25/05 0850 HRS
Sample Description WWTP/EFF **Date/Time Received** 5/25/05 1103 HRS
PO NO 55573 **Invoice Number** 7462
E05-051067 RID=05-5-5

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	3.50	0.3 mg/L	AP	5/26/05 0730 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	5/27/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.45	0.10 mg/L	CK	5/26/05 1015 HRS

JUN 2005

Sara Ann Casella
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

Client CITRUS COUNTY UTILITIES **Sample Number** E051103
Project LEACHATE PLANT **Date/Time Sampled** 6/1/05 1000 HRS
Sample Description WWTP/EFF **Date/Time Received** 6/1/05 1155 HRS
PO NO 55573 **Invoice Number** 7497
E05-051103 RID #05-6-1

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.11	0.3 mg/L	AP	6/2/05 0730 HRS
SM2540-D	TSS	mg/L	1.5	1.0 mg/L	AP	6/3/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	1.3	0.10 mg/L	CK	6/2/05 0925 HRS

JUN

Sally Ann Carrillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

Client CITRUS COUNTY UTILITIES **Sample Number** E051162
Project LEACHATE PLANT **Date/Time Sampled** 6/8/05 0930 HRS
Sample Description WWTP/EFF **Date/Time Received** 6/8/05 1138 HRS
PO NO 55573 **Invoice Number** 7497
E05-051162 RID 05-6-2

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	3.08	0.3 mg/L	AP	6/8/05 1330 HRS
SM2540-D	TSS	mg/L	5.0	1.0 mg/L	AP	6/10/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	2.6	0.10 mg/L	CK	6/9/05 0845 HRS

JUN 13 2005

Sally Ann Casella

Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT

JUN 29 2005

Client CITRUS COUNTY UTILITIES **Sample Number** E051230
Project LEACHATE LANDFILL **Date/Time Sampled** 6/15/05 0845 HRS
Project No 55573 **Date/Time Received** 6/15/05 1220 HRS
Sample Description WWTP/INF **Invoice Number** 7497
E05-051230 R113 = 05-6-3

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	102.5	0.3 mg/L	AP	6/16/05 0730 HRS
SM2540-D	TSS	mg/L	20.0	1.0 mg/L	AP	6/17/05 0900 HRS

E05-051230 R113 = 05-6-4 **Date/Time Sampled** 6/15/05 0845 HRS
Sample Description WWTP/EFF **Date/Time Received** 6/15/05 1220 HRS

Method	Analytes	Units	Results	% Removal MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.33	97.72% 0.3 mg/L	AP	6/16/05 0730 HRS
SM2540-D	TSS	mg/L	<1	100% 1.0 mg/L	AP	6/17/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	0.37	0.10 mg/L	CK	6/16/05 0925 HRS

AMMONIA
SUB TO
ADVANCED ENVIRONMENTAL LABORATORIES
DHRS CERT IFICATION #E84589/E82574

Sally Ann Casella

Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT

Client CITRUS COUNTY UTILITIES **Sample Number** E051286
Project LEACHATE PLANT **Date/Time Sampled** 6/22/05 1000 HRS
Sample Description WWTP/EFF **Date/Time Received** 6/22/05 1225 HRS
PO NO 55573 **Invoice Number** 7497
E05-051286 RID = 05-6-5

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.55	0.3 mg/L	AP	6/23/05 0730 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	6/24/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	<0.10	0.10 mg/L	CK	6/23/05 0900 HRS

Sally Ann Cavill
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL

**S.A.C. ENVIRONMENTAL LABORATORY INC
DOH CERTIFICATION #84492
ANALYTICAL REPORT**

RECEIVED

JUL 14 2005

Solid Waste Section

Client CITRUS COUNTY UTILITIES **Sample Number** E051315
Project LEACHATE PLANT **Date/Time Sampled** ^{FP} 6/29/05 0845 HRS
Sample Description WWTP/EFF **Date/Time Received** 6/29/05 1045 HRS
PO NO 55573 **Invoice Number** 7497
E05-051315 RID=05-6-6

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	3.92	0.3 mg/L	AP	6/30/05 1300 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	7/1/05 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	<0.10	0.10 mg/L	CK	6/29/05 0945 HRS

Sally Ann Conillo
Laboratory Manager

For all Results qualified with an I, the PQL is defined to be 4 times the MDL