



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

**Dept. of Environmental
Protection**

July 13, 2006

JUL 17 2006

Mr. John Morris,
Florida Department of
Environmental Protection
13051 N Telecom Pkwy
Temple Terrace, FL 33637-0926

Southwest District

**RE: WEEKLY LEACHATE MONITORING REPORT FOR CITRUS COUNTY CENTRAL
LANDFILL 60 AND 80 ACRE SITES - PERMIT NO. 21375-008-SO/01**

Dear Mr. Morris:

Enclosed please find the quarterly Leachate Monitoring Results, together with the Operator's Reports for the months of April, May and June 2006:

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

Please note SAC Laboratory has experienced equipment failure for Nitrate analysis for the month of April. Analysis for this parameter was completed by Advance Environmental Laboratories.

Additionally, sampling was not completed from 5/24/06 through 6/28/06 due to plant shut down for installation of telemetry equipment.

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: Glenn W. McCracken, Director, Department of Public Works (w/xls sheet)
Susan Pelz, Florida Department of Environmental Protection (w/xls sheet)

LEACHATE
EFFLUENT

CITRUS COUNTY CENTRAL LANDFILL
WEEKLY LEACHATE MONITORING

Dept. of Environmental
Protection

JUL 17 2006

SAC
Laboratories

MAXIMUM CONTAMINANT LEVEL BY PERMIT

Results	20	10	20
DATE	CBOD < 5 day	MG/L < NITRATE MG/L <	SUSPENDED SOLIDS MG/L
4/5/06	1.22	1.1	3.0
4/12/06	1.77	1.2	3.5
4/19/06	2.76	0.027	< 1.0
4/26/06	5.07	0.81	16.5
5/3/06	2.5	0.68	7.0
5/10/06	2.16	0.1	< 1.0
5/17/06	2.69	1.4	8.0
5/24/06	1.61	4.4	14.5
5/31/06	Plant off line for telemetry installation - no sample		
6/7/06	Plant off line for telemetry installation - no sample		
6/14/06	Plant off line for telemetry installation - no sample		
6/21/06	Plant off line for telemetry installation - no sample		
6/28/06	Plant off line for telemetry installation - no sample		

Southwest District

cjw

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

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


PERMIT NUMBER: 21375-008-SO/01
WACS FACILITY ID NUMBER: SWD/09/039859
TEST SITE ID NUMBER: WACS 175
MONITORING PERIOD:

From: 4/1 To: 04/30/2006
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	0.009		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					2.7		mg/L		
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Total Suspended Solids	Sample Measurement					6.0		mg/L		
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Nitrate (as N)	Sample Measurement						1.2	mg/L		
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		mg/L	Weekly	Grab
pH	Sample Measurement				7.8		8.5	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)
Gerald Nusbaum Utility Operator II C/14117		(352)527-7670	07/12/06

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

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

Client CITRUS COUNTY UTILITIES **Sample Number** E060645
Project LEACHATE PLANT **Date/Time Sampled** 4/5/06 0815 HRS
Sample Description WWTP/EFF **Date/Time Received** 4/5/06 1100 HRS
PO NO 55573 **Invoice Number** 8301

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.22	0.3 mg/L	AP	4/6/06 0700 HRS
SM2540-D	TSS	mg/L	3.0	1.0 mg/L	AP	4/6/06 0800 HRS

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

Sally Ann Carrillo
Laboratory Manager

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

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Sac Environmental Lab

Report No.: T063685

Project Name: Citrus County Utilities

Date/Time Received: 4/5/06 13:35

Lab Code: T063685-01

Date/Time Sampled: 04/05/2006 08:15

Client Sample ID: Effluent

Shipping Method: AEL Pick-up

Site: Landfill Leachate Plant

Sampled By:

Matrix: Water

Sampling Method: G

Miscellaneous Analytes

Analytes:	Dilution	Adjusted MDL	Adjusted PQL	Results	Units	Qualifier(s)	Method	Parameter Comment	Lab
Nitrate (as N)	1	0.027	0.11	1.1	mg/L		SM4500NO3-F		T

T DOH certification #E84589 (AEL-Tampa) (FL NELAC Certification)

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

Client CITRUS COUNTY UTILITIES **Sample Number** E060701
Project LEACHATE LANDFILL **Date/Time Sampled** 4/12/06 1050 HRS
Project No 55573 **Date/Time Received** 4/12/06 1300 HRS
Sample Description WWTP/INF **Invoice Number** 8301

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	130.00	0.3 mg/L	AP	4/13/06 0700 HRS
SM2540-D	TSS	mg/L	104.0	1.0 mg/L	AP	4/14/06 0800 HRS

Sample Description WWTP/EFF **Date/Time Sampled** 4/12/06 1100 HRS
Date/Time Received 4/12/06 1300 HRS

Method	Analytes	Units	Results	% Removal MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.77	98.63% 0.3 mg/L	AP	4/13/06 0700 HRS
SM2540-D	TSS	mg/L	3.5	96.63% 1.0 mg/L	AP	4/14/06 0800 HRS

AMMONIA AND NITRATE
SUB TO
ADVANCED ENVIRONMENTAL LABORATORIES
DHS CERTIFICATION #E84589/E82574

Sally Ann Cavillo

Laboratory Manager

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

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Sac Environmental Lab

Report No.: T064069

Project Name: Leachate Landfill

Date/Time Received: 4/13/06 08:10

Lab Code: T064069-01

Date/Time Sampled: 04/12/2006 11:00

Client Sample ID: Effluent

Shipping Method: Client drop off

Site: WWTP

Sampled By: B.M.

Matrix: Water

Sampling Method: G

Miscellaneous Analytes

Analytes:	Dilution	Adjusted MDL	Adjusted PQL	Results	Units	Qualifier(s)	Method	Parameter Comment	Lab
Nitrate (as N)	5	0.14	0.54	1.2	mg/L		SM4500NO3-F		T

T DOH certification #E84589 (AEL-Tampa) (FL NELAC Certification)

Lab Code: T064069-02

Date/Time Sampled: 04/12/2006 10:50

Client Sample ID: Effluent

Shipping Method: Client drop off

Site: WWTP

Sampled By: B.M.

Matrix: Water

Sampling Method: G

Miscellaneous Analytes

Analytes:	Dilution	Adjusted MDL	Adjusted PQL	Results	Units	Qualifier(s)	Method	Parameter Comment	Lab
Ammonia (as N)	200	5.1	20	240	mg/L		E350.1		T

T DOH certification #E84589 (AEL-Tampa) (FL NELAC Certification)

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

Client CITRUS COUNTY UTILITIES **Sample Number:** E060776
Project LEACHATE PLANT **Date/Time Sampled** 4/19/06 1020 HRS
Sample Description WWTP/EFF **Date/Time Received** 4/19/06 1400 HRS
PO NO 55573 **Invoice Number** 8301

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.76	0.3 mg/L	AP	4/20/06 0700 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	4/21/06 0730 HRS

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

Sally Ann Carrillo
Laboratory Manager

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

Advanced Environmental Laboratories, Inc.

Analytical Report

Client: Sac Environmental Lab

Report No.: T064371

Project Name: Citrus County Utilities

Date/Time Received: 4/20/06 11:00

Lab Code: T064371-01

Date/Time Sampled: 04/19/2006 10:20

Client Sample ID: Effluent

Shipping Method: Client drop off

Site: Leachate Plant

Sampled By: Ron Kultz

Matrix: Water

Sampling Method: G

Miscellaneous Analytes

Analytes:	Dilution	Adjusted MDL	Adjusted PQL	Results	Units	Qualifier(s)	Method	Parameter Comment	Lab
Nitrate (as N)	1	0.027	0.11	0.027	mg/L	U	SM4500NO3-F		T

U The compound was analyzed for but not detected.

T DOH certification #E84589 (AEL-Tampa) (FL NELAC Certification)

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

Client	CITRUS COUNTY UTILITIES	Sample Number	E060810
Project	LEACHATE PLANT	Date/Time Sampled	4/26/06 1100 HRS
Sample Description	WWTP/EFF	Date/Time Received	4/26/06 1145 HRS
PO NO	55573	Invoice Number	8301

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	5.07	0.3 mg/L	AP	4/27/06 0700 HRS
SM2540-D	TSS	mg/L	16.5	1.0 mg/L	AP	4/28/06 0745 HRS
SM4500-NO3-E	NITRATE	mg/L	0.81	0.10 mg/L	CK	4/27/06 0930 HRS


Laboratory Manager

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

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: 21375-008-SO/01
WACS FACILITY ID NUMBER: SWD/09/039859
TEST SITE ID NUMBER: WACS 175
MONITORING PERIOD:

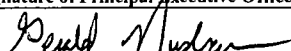
FACILITY: Central Landfill Leachate Plant
LOCATION: 230 W. Gulf to Lake Hwy
Lecanto, FL 34461
COUNTY: Citrus

From: 5/1 To: 05/31/2006
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	0.000		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					2.2		mg/L		
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Total Suspended Solids	Sample Measurement					7.6		mg/L		
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Nitrate (as N)	Sample Measurement						4.4	mg/L		
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		mg/L	Weekly	Grab
pH	Sample Measurement				7.9		8.5	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)
Gerald Nusbaum Utility Operator II C/14117		(352)527-7670	07/12/06

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.

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

Client	CITRUS COUNTY UTILITIES	Sample Number	E060840
Project	LEACHATE PLANT	Date/Time Sampled	5/3/06 0845 HRS
Sample Description	WWTP/EFF	Date/Time Received	5/3/06 1100 HRS
PO NO	55573	Invoice Number	8383

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.50	0.3 mg/L	AP	5/4/06 0700 HRS
SM2540-D	TSS	mg/L	7.0	1.0 mg/L	AP	5/5/06 1000 HRS
SM4500-NO3-E	NITRATE	mg/L	0.68	0.10 mg/L	CK	5/4/06 0945 HRS

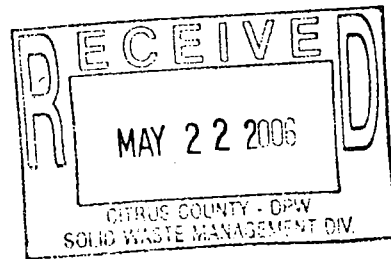
Sally Ann Casella
Laboratory Manager

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	E060907
Project	LEACHATE PLANT	Date/Time Sampled	5/10/06 0830 HRS
Sample Description	WWTP/EFF	Date/Time Received	5/10/06 1025 HRS
PO NO	55573	Invoice Number	8383

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.16	0.3 mg/L	AP	5/11/06 0800 HRS
SM2540-D	TSS	mg/L	<1	1.0 mg/L	AP	5/12/06 0700 HRS
SM4500-NO3-E	NITRATE	mg/L	0.10	0.10 mg/L	CK	5/10/06 1030 HRS



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**

Client CITRUS COUNTY UTILITIES **Sample Number** E060961
Project LEACHATE LANDFILL **Date/Time Sampled** 5/17/06 1050 HRS
Project No 55573 **Date/Time Received** 5/17/06 1246 HRS
Sample Description WWTP/INF **Invoice Number** 8383

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	152.50	0.3 mg/L	AP	5/18/06 0900 HRS
SM2540-D	TSS	mg/L	30.0	1.0 mg/L	AP	5/19/06 1130 HRS

Sample Description WWTP/EFF **Date/Time Sampled** 5/17/06 1050 HRS
Date/Time Received 5/17/06 1246 HRS

Method	Analytes	Units	Results	% Removal MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	2.69	98.23% 0.3 mg/L	AP	5/18/06 0900 HRS
SM2540-D	TSS	mg/L	8.0	73.3% 1.0 mg/L	AP	5/19/06 1130 HRS
SM4500-NO3-E	NITRATE	mg/L	1.4	0.10 mg/L	CK	5/18/05 0935 HRS

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

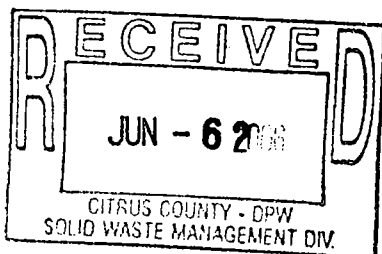
Sally Ann Caville
Sally Ann Caville
Laboratory Manager

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

Client CITRUS COUNTY UTILITIES **Sample Number** E061008
Project LEACHATE PLANT **Date/Time Sampled** 5/24/06 0915 HRS
Sample Description WWTP/EFF **Date/Time Received** 5/24/06 1111 HRS
PO NO 55573 **Invoice Number** 8383

Method	Analytes	Units	Results	MDL mg/L	Analyst	Analysis Date/Time
SM5210-B	CBOD	mg/L	1.61	0.3 mg/L	AP	5/25/06 1700 HRS
SM2540-D	TSS	mg/L	14.5	1.0 mg/L	RAC	5/26/06 0900 HRS
SM4500-NO3-E	NITRATE	mg/L	4.4	0.10 mg/L	CK	5/26/06 0830 HRS



Sally Ann Ciunillo
Laboratory Manager

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

PERMIT NUMBER: 21375-008-SO/01
WACS FACILITY ID NUMBER: SWD/09/039859
TEST SITE ID NUMBER: WACS 175
MONITORING PERIOD:

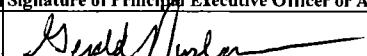
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Lecanto, FL 34461
COUNTY: Citrus

From: 6/1 To: 06/30/2006
CLASS SIZE: 1-C
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C OD, 5 day 20 degree C	Sample Measurement					0.0		mg/L		
PARM Code 80082	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Total Suspended Solids	Sample Measurement					0.0		mg/L		
PARM Code 900201	Permit Requirement					20 (Mo. Avg.)		mg/L	Weekly	Grab
Nitrate (as N)	Sample Measurement						0.0	mg/L		
PARM Code 071850	Permit Requirement					10.0 (Mo. Avg.)		mg/L	Weekly	Grab
pH	Sample Measurement				0.0		0.0	S.U.		
PARM Code 00500	Permit Requirement				6.5 Min.		8.5 Max.	S.U.	Daily	Grab

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Gerald Nusbaum Utility Operator II C/14117		(352)527-7670	07/12/06

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