

VERMONT MONTHLY WATER SYSTEM OPERATIONS REPORT

SUPPLEMENTAL INFORMATION

For the month of :

1998

NOTE: This Side of The Form Must be Completed if You:

- 1) Disinfect/chlorinate your water on any day(s) of the month. (Column 2)
- 2) Fluoridate your water. Daily values are required by Rule. (Column 3)
- 3) Are required by your Operating Permit to report daily values.

Day of the Month	Water Production	Disinfection/Chlorination (Free CL, in mg/l)	Fluoride (mg/l)	Other (Describe)
	(Column 1) Metered Values (Gallons/Day)	(Column 2) Dist. System Residual Analysis	(Column 3) Entering Distribution System	(Column 4) _____ PO4 _____
1	58,700	0.03		1.7
2	58,700	0.03		1.7
3	56,686			0.95
4	56,686			0.95
5	56,686			0.95
6	56,686			0.95
7	56,686			0.95
8	56,686			0.95
9	56,686			0.95
10	68,029	0.08		0.92
11	68,029	0.08		0.92
12	68,029	0.08		0.92
13	68,029	0.08		0.92
14	68,029	0.08		0.92
15	68,029	0.08		0.92
16	68,029	0.08		0.92
17	59,500	0.34		0.84
18	59,500	0.34		0.84
19	59,500	0.34		0.84
20	59,500	0.34		0.84
21	59,500	0.34		0.84
22	59,500	0.34		0.84
23	59,500	0.34		0.84
24	58,186	0.11		0.75
25	58,186	0.11		0.75
26	58,186	0.11		0.75
27	58,186	0.11		0.75
28	58,186	0.11		0.75
29	58,186	0.11		0.75
30	58,186	0.11		0.75
31	N/A			
Totals	1,814,207	N/A	N/A	N/A

Questions? Please Call 1-800-823-6500