

### Request for Proposals (RFP) FY2026-01

# OPERATIONS, MAINTENANCE AND MANAGEMENT OF WASTEWATER TREATMENT SYSTEM

## Addendum 1: 12/10/2025

### Additional information provided at site tour:

- 1. Map of Facilities for Tour
- 2. Copy of RFP Schedule (no change)
- 3. October 2025 DEP Discharge Monitoring Report

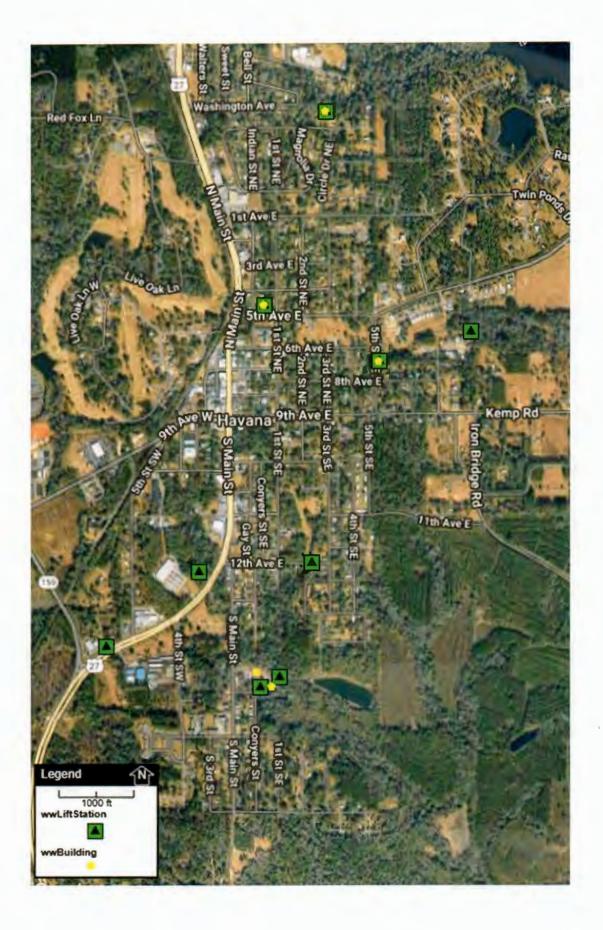
### Havana Wastewater Treatment System Map of Facilities

### Wastewater Facility location - 110 14th Ave, Havana, Florida

### Lift station locations

- 1. 216 Dogwood Ave
- 2. 5th Street Northeast
- 3. 1125th Ave East
- 4. 12th Ave East
- 5. 101 Technogily Way
- 6. 110 14th Ave
- 7. US Hwy 12/Cascade Falls Subdivision
- 8. US Hwy 27/Dollar General

Sprayfield Location - 112 14th Ave, Havana, Florida



### Havana Wastewater Treatment System Spray Fields



### **Request for Proposals**

#### FY2026-01

### **WW Treatment System**

EVENT	Date	TIME		
Website Advertisement for RFP	November 20, 2025	1:00 pm		
Newspaper Advertisement for RFP	November 27, 2025	N/A		
Optional pre-submission Meeting	December 10, 2025	10:00 am		
Deadline to submit questions & clarification requests	December 19, 2025	4:00 pm		
Deadline for Town to Issue Responses to Written Comments and Questions	December 23, 2025	4:00 pm		
Proposal submittal and RFP Opening	January 7, 2026	10:00 am		
Town Council Selection	TBD	TBD		
Agreement and Contract Execution	TBD	TBD		
Contract start date	TBD	TBD		

**QUESTIONS:** By 12/19/25

All questions should be sent via email no later than 12/19/2025 at 4:00 PM to: clerk@townofhavana.com

RESPONSES: By 12/23/25

All questions / responses will be posted no later than 12/23/2025 at 4:00 PM under Related Documents at: https://www.townofhavana.com/solicitations

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

PERMITTEE NAME: The Town of Havana

ADDRESS:

711 N Main St

Havana, FL 32333

PERMIT NUMBER: LIMIT:

FLA100765

**FINAL** REPORT: Monthly

FACILITY TYPE:

DW

Domestic

MONITORING GROUP: R-001

FACILITY: LOCATION: Havana WWTF 110 E 14th Ave

Havana, FL 32333

DESCRIPTION:

Part II Reuse System - 179 acre Forested Pasture

GROUP:

COUNTY: GAD:	From: 10/01/2025 To: 10/31/2025									
Parameter		Quantity or Loading	Units	Qualit	ration	Units	No. Ex.	Frequency of Analysis	Sample Type	
BOD, Carbonaceous 5 day, 20C	Sample Measurement				2.6			0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 80082 Y Mon. Site: EFF-03	Permit Requirement				20.0 (Anni Avg)		mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
BOD, Carbonaceous 5 day, 20C	Sample Measurement			2	2	1.3		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 80082 1 Mon. Site: EFF-03	Permit Requirement			60.0 (Maximum)	45.0 (Wkly Avg)	30.0 (Me Avg)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended	Sample Measurement				3.8			0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00530 Y Mon. Site: EFF-03	Permit Requirement				20.0 (Anni Avg)		mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Solids, Total Suspended	Sample Measurement			2	2	2		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00530 1 Mon. Site: EFF-03	Permit Requirement			60.0 (Maximum)	45.0 (Wkły Avg)	30.0 (Me Avg)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)

Parameter		Quantity	or Loading	Units	Units Quality	ty or Concentration		Units	No. Ex.	Frequency of Analysis	Sample Type
Nitrogen, Kjeldahl, Total (as N)	Sample Measurement					9.77	1.0		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00625 1 Mon. Site: EFF-03	Permit Requirement					Report (Me Avg)	Report (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Nitrite plus Nitrate, Total 1 det. (as N)	Sample Measurement					9.65	11.6		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00630 1 Mon. Site: EFF-03	Permit Requirement					Report (Me Avg)	Report (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Phosphorus, Total (as P)	Sample Measurement					2.24	4.0		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00665 1 Mon. Site: EFF-03	Permit Requirement					Report (Me Avg)	Report (Maximum)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Coliform, Fecal	Sample Measurement					6.0			0	1 Bi-weekly; every 2 weeks	Grab
PARM Code 74055 Y Mon. Site: EFF-03	Permit Requirement					200.0 (Anal Avg)		#/100mL		(1 Bi-weekly; every 2 weeks)	(Grab)
Coliform, Fecal	Sample Measurement				1	1	1		0	1 Bi-weekly; every 2 weeks	Grab
PARM Code 74055 1 Mon. Site: EFF-03	Permit Requirement				800.0 (Maximum)	400.0 (90th %)	Report (Mo Geomn)	#/100mL		(1 Bi-weekly; every 2 weeks)	(Grab)

Parameter		Quantity or Loading		Units	Quality or	Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
рН	Sample Measurement				6.9	7.2		0	5 Days/Week	Grab
PARM Code 00400 1 Mon. Site: EFF-03	Permit Requirement				6.0 (Minimum)	8.5 (Maximum)	s.u.		(5 Days/Week)	(Grab)
Chlorine, Total Residual	Sample Measurement				4.9			0	5 Days/Week	Grab
PARM Code 50060 A Add. Desc: For Disinfection Mon. Site: EFA-02	Permit Requirement				0.5 (Minimum)		mg/L		(5 Days/Week)	(Grab)
Flow	Sample Measurement		0.1					0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 Y Mon. Site: FLW-01	Permit Requirement		0.4 (Anni Avg)	MGD					(5 Days/Week)	(Recording Flow Meter with Totalizer)
Flow	Sample Measurement	0.120	0.098					0	5 Days/Week	Recording Flow Meter with Totalizer
PARM Code 50050 1 Mon. Site: FLW-01	Permit Requirement	Report (3MonAvg)	Report (Mo Avg)	MGD					(5 Days/Week)	(Recording Flow Meter with Totalizer)
BOD, Carbonaceous 5 day, 20C	Sample Measurement					172.33		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 80082 G Add. Desc: Influent Mon. Site: INF-01	Permit Requirement					Report (Me Avg)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)

Parameter		Quantity o	or Loading	Units	Qualit	y or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Solids, Total Suspended	Sample Measurement					139.33		0	1 Bi-weekly; every 2 weeks	8-hr Flow Proportioned Composite
PARM Code 00530 G Add. Desc: Influent Mon. Site: INF-01	Permit Requirement					Report (Mo Avg)	mg/L		(1 Bi-weekly; every 2 weeks)	(8-hr Flow Proportioned Composite)
Percent Capacity, (TMADF /Permitted Capacity) x 100	Sample Measurement					29.92		0	1 Monthly	Calculated
PARM Code 00180 P Mon. Site: CAL-01	Permit Requirement					Report (Qrtr Avg)	percent		(1 Monthly)	(Calculated)
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  Denvil Presnal	MY DIRECTION OR SUI PERSONNEL PROPERLY	PERVISION IN AC GATHERED AND ERSONS WHO MA RMATION, THE I ATE AND COMP	CORDANCE WIT DEVALUATED TH NAGE THE SYSTI NFORMATION SU LETE, I AM AWA	H A SYSTEM DE IE INFORMATION EM, OR THOSE P BMITTED IS, TO ARE THAT THER	SIGNED TO ASS SUBMITTED. B ERSONS DIRECT THE BEST OF E ARE SIGNIFIC	LY RESPONSIBLE FOR Electron MY KNOWLEDGE AND CANT PENALTIES FOR	THORIZED AGENT	L EXECUTI		SUBMITTED ON 89 11/24/2025

#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

ADDRESS: 7 H  FACILITY: H LOCATION: 1	ne Town of Havana 1 N Main St avana, FL 32333 avana WWTF 0 E 14th Ave avana, FL 32333 ADSDEN						PERMIT NUM LIMIT: FACILITY TY MONITORING DESCRIPTION MONITORING	PE: G GROUP: N:	DW GRC RMP-Q Biosolids Quar		
Parameter		Quantity or Lon	ding	Units	Qual	ty or Conc	entration	Units	Ne. Ex.	Frequency of Analysis	Sample Type
Biosolids Quantity (Transferred)	Sample Measurement		0						0	1 Monthly	Calculated
PARM Code B0007 + Mon. Site: RMP-3	Permit Requirement		port Total)	dry tons						(1 Monthly)	(Calculated
Biosolids Quantity (Landfilled	Sample Measurement	<u> </u>	0						0	1 Monthly	Calculated
PARM Code B0008 + Mon. Site: RMP-4	Permit Requirement		port Total)	dry tons						(1 Monthly)	(Calculated
NAME/TITLE PRINCIPAL EXECUTIVE OFFIC OR AUTHORIZED AGENT Denvil Presnal	MY DIRECTION OR SUF PERSONNEL PROPERLY OF THE PERSON OR PE GATHERING THE INFOR BELIEF, TRUE, ACCUR.	LTY OF LAW THAT THIS PERVISION IN ACCORDAL GATHERED AND EVALU RSONS WHO MANAGE TIRMATION, THE INFORMA ATE AND COMPLETE. I FORMATION, INCLUDING	NCE WITH A JATED THE I HE SYSTEM ATION SUBN AM AWARI	A SYSTEM DESI INFORMATION S , OR THOSE PE MITTED IS, TO E THAT THERE	GNED TO ASS SUBMITTED. E RSONS DIRECT THE BEST OF ARE SIGNIFI	SURE THAT QUASED ON MY TLY RESPONSI MY KNOWLED CANT PENALT	INQUIRY BLE FOR Electronic GE AND TES FOR	HORIZED AGE	PAL EXECUTIVE NT	OFFICER TELEPHONE (850) 627-2089	SUBMITTED OF 11/24/2025