

FILE_COPY

June 24, 1997

Ms. Blanca Bayó, Director Division of Records & Reporting Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0865

Re: Docket No. 970409-SU -- Investigation into Appropriate Wastewater Rates for the Tropical Isles Facility of Southern States Utilities, Inc., in St. Lucie County

Dear Ms. Bayó:

Please find attached hereto for filing in the above docket 15 copies of (1) this letter, (2) forwarding address returns from customers received to date, and (3) a billing analysis performed by Florida Water Services Corporation ("Florida Water") with accompanying rate schedules reflecting a base facility/gallonage rate structure.

As to the billing analysis and rates, please note that Florida Water has matched the vast majority of customers listed in its database to those listed in the data provided by the Fort Pierce Utilities Authority (the "Authority"). Although some differences as to customer identification remain, Florida Water believes those differences are minor and do not have a measurable impact on the billing analysis or rates.

		- 1 1 pr
A CT	Please acknowledge receipt of the enclosed extra copy of this letter envelope provided.	
Α	, was the think of	
A.	If you have any questions or comme at (407) 884-8777, ext. 260.	ents on the above, please call me
CAF .	de (407) 004 0777, exc. 200.	
CMU	U	Sincerely yours,
CTR	· · · · · · · · · · · · · · · · · · ·	Sincerery yours,
	and the state of t	On/ 41 10
LEG	3 15	Mallalio !//
	.	
Ohd	The second secon	Matthew Feil, Esq. ℓ Staff Attorney

Attachments

c: Harold McLean (OPC)

DOCUMENT NUMBER-DATE

Florida Water Services Corporation / P.O. Box 609520 / Orlando, Florida 32860-9520 / Phone 407/880-0058 / Fax 407/880-1395

Water For Florida's Future

FRENCHES AND FRENCHES OF FRENCHES AND FRENCHES A





I will be out of town for the period 9-/- through customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

LOTTIES Jachers Name

323 TROPICAL ISLE CIRCLE
Street Address

FORT PIERCE FL 34982
City State/Zip Code

561-489-2963

Please return completed form to:



I will be out of town for the period 2 through and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly Nadine J. Ginn 21/8 Pleas ANTVIEW AVE Ashtabula Ohio 44004
City State 7 in Code 216 - 964 - 208/ Phone Number Notice yours up to Please return completed form to: Judy Lee Sweat your old tricks selectuling Florida Water Services Corporation P.O. Box 609520 meetings when there are so fun Orlando, FL 32860-9520 people there. Your rates stink as much as the sewage you Nadine J. Hinn



Need to Send to 152

I will be out of town for the period <u>MAY 30</u> through <u>SEB 30</u> an customer meeting. Therefore, I request that the Public Service Commiss regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

348 SEA HORGE TERR

FT PIERCE | FL 34992 City State/Zip Code

468-0378 Phone Number

Please return completed form to:





Please Print Clearly

CHARLES P. ZANES

Name

4 DUERCOOK DRIVE

Street Address

Tuestan ton M. Osus 7
City State/Zip Code

605-256-3913

Phone Number

Please return completed form to:



Judy Lee Sweat

P.O. Box 609520 Orlando, FL 32860-9520

Florida Water Services Corporation

I will be out of town for the period customer meeting. Therefore, I req regarding the proposed rate change	uest that the Public	Service Commi	ssion forward information to me
Please Print Clearly Madeline Kelly 472 Thames Bluff Ridge Fort Pierce, F1, 34982	<u>.</u>	_	
Name			
Street Address			,
City	State/Zip Code		
561-461-4644 Phone Number			
Please return completed form to:			



I will be out of town for the period <u>JANUARY</u> through <u>JUNE</u> and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

BERNARD OR MICHELINE MORISSETTE

673 - 8TH STREET

Street Address

ROXTON POND, QC CANADA

City State/Zip Code

(514) 378-6244 (CANADA)

Please return completed form to:



I will be out of town for the period and will not be able to attend the customer meeting. Therefore, I request that the Public Serwice Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

CHARLES R. RAMEY

210 SEA CONCL PL Street Address

FT PIERCE 71 34982
City State/Zip Code

561-460-1462

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

Seems like & Should Know the date of This meeting Ledone & had Should I would



Orlando, FL 32860-9520

I will be out of town for the per customer meeting. Therefore, I regarding the proposed rate cha	I request that the Public	Service Com	nission forward i	
Please Print Clearly				
Roland J. U'N	eiil			
Name		-		
Mrc Bocs &	hica et			
Street Address				
Fr Pierce	J4982-			
City	State/Zip Code			
SUY - U447 Phone Number				
Please return completed form to):			
Judy Lee Sweat Florida Water Services Corpora P.O. Box 609520	ation			



I will be out of town for the period AFRIL 15t through DEC. and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

JEANNETTE LE COMTE

110 DE LA PLAGE

Street Address

State/Zip Code VO CINO

819-397-4095

Phone Number

Please return completed form to:



I will be out of town for the period Afric 15 through 10 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

JEAN-CLAUDE PILON Name

202 Old KEY WEST PL.
Street Address

F. PIERCE F.h. 34982-7928
City State/Zip Code

595-6378

Phone Number

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

MY Add IN CANADA

BIFOSOS LEGAGESTIS THAL SR OBLIANAL

PILON 76 NICOLET --HULL PG JOY 2J5 CANADA

Marthurallingalianianian



I will be out of town for the period $\frac{\sqrt{-1-9.7}}{1-9.7}$ through $\frac{9-20-9.7}{1-9.7}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

DONALD DOROTHY FUHRMEISTER

16 BEECH PLACE

Street Address

WOODBURY

NJ. 0809 L

State/Zip Code

609.845-1281

Phone Number

Please return completed form to:



I will be out of town for the period <u>MAY 97</u> through <u>Dir C9</u> and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

DAVID LeCLAIR

P.O. Box 6 SITE 9 RR# 3

NEW CLASGOW NOVA SO

City

NOVA SCOTIA.
State/Zip Code
CANADA. B2H5C6

902-396-5507

Phone Number

Please return completed form to:



I will be out of town for the period MAY through OCTOBER and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

MARTEL Name

5680 SANDFLY

Street Address

561-489-0959

Phone Number

PS. My mail is FORWARDED TO CANADA VIA

Please return completed form to:

US POSTAL SERVICES



I will be out of town for the period $\frac{3197}{}$ through $\frac{10/97}{}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

JOHN J LUNDY C/O CUTAJAR

Street Address

Forest Hills N.V. 11375
City State/Zip Code

(718) 261-9565

Please return completed form to:



I will be out of town for the period through and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:
Please Print Clearly
VINCENT J YAKAVONIS Name
2 RAYMOND Rd. EXT Street Address
BURLINGTON MA 01803 City State/Zip Code
1-617-272-2447 Phone Number

Please return completed form to:



PLANT 2101 CUST 981269 May 20, 1997

I will be out of town for the period April through 02/3/ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

RONALD A FOY

RRI BOX 44 SITE!

Street Address

BRECHIN ONT CANADA LOK-1BO
State/Zip Code

705-484-0371

Phone Number

Please return completed form to:



Please Print Clearly

Jame DNA M. BARRY

5688 Sandfly Ct.

City State/Zip Code

Phone Number

Please return completed form to:



- from 6/1.6/97

I will be out of town for the period 5/20/97 through 6/3/97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

MADELINE M. LENNON
Name

5681 HEMINGWAY COURT

FT. PIERCE FLA 34982

City State/Zip Code

561-461-2615 Phone Number

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

This seems to be typical Ha Hater Services to send a letter received May 13th advising that there will be a meeting late May or early June (?) as you are such arrane many of our park residents have gone month by the end of many; atherwise, they would attend this meeting.



I will be out of town for the period APRIL 17 through NOV. 17 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Μ,	RUTH	SHEPARD
Name		

Please return completed form to:



I will be out of town for the period MAY through JAN and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Rose C. Imprescia Name

33 CLEVELAND AVE

617-843-8959

Please return completed form to:



I will be out of town for the period 4/1/97 through 12/1/97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

LEGLIE M. DUBB

5177 CONSAUL RD

Street Address

HAGAMAN NY 12086 City State/Zip Code

(518) 882-9533

Phone Number

Please return completed form to:



	I will be out of town for the period through through through and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:
	Please Print Clearly
	MRS FULL / LEDIARY Name C/C BuffaRdi
	Name C/C - BuffaRdi -
	3 dolomba DRI
	Street Address
•	SCHOOL TILLY State/Zip Code
	5 18-356-3538 Phone Number

-#2162

Please return completed form to:



I will be out of town for the period $\frac{5}{17}$ through $\frac{10}{19}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Philip J. Grpenter
Name
Yo Deer Run Caypground
P.O. 120
Street Address

City State/Zip Code

(518) 66 4-3399

Phone Number

Please return completed form to:



I will be out of town for the period through through and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Name

25 5 South Annual Control of the Control of t

Street Address

City State/Zip Code

212 44.2-6843

Phone Number

Please return completed form to:



I will be out of town for the period _______ through ______ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Gardon Keeney

3.35 Fropical Isles Circle

FT, Pierce F1. 34982
City State/Zip Code

(561), 467-0770 Phone Number

Please return completed form to:



I will be out of town for the period <u>Fraction</u> Through <u>10/97</u> and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

MRS-GUSTAVE O. NEWMAN

149 Daviton HVE

Street Address

PATCHOGUE NEW YORK 11772
State/Zip Code

516-475-8146

Phone Number

Please return completed form to:



I will be out of town for the period $\frac{5/1/67}{1}$ through $\frac{11/1/67}{1}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Name

2902-STAUNION ROAD

Street Address

HUNTINGTON W.VA: 25702-1225

City State/Zip Code

Please return completed form to:



customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

ROBERT/GRACE STOTT
Name

26 MACLAY ROAD
Street Address

Please return completed form to:



I will be out of town for the period 5-15-97 through 7-3-97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

WALTER B. JONES

C/O MRS MARY SCACCIF

1032 N. RICHMOND AVE

LINDENHURS T N. Y 11757
City State/Zip Code

Phone Number

Please return completed form to:



Please Print Clearly

I will be out of town for the period MAY 97 through DEC 97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

JOHN SPIRCEF

Name

821 N. HENRY ST

Street Address

CLESTLINE OHO 44827

City State/Zip Code

419-683-4158

Please return completed form to:



I will be out of town for the period 4/1/97 through 1/2017 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

GEORGE D. ZELKO

42 S. SPINNAKER DR.

MYSTIC ISLAND NJ 08089
City State/Zip Code

(609) 294-0317 Phone Number

Please return completed form to:



I will be out of town for the period MAY through OCT and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

THOMAS R BROPHY
Name

JOSH HEMINGWAY CT

F7- PIERCE. F1 34982-7910

State/Zip Code

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

p. s. whey was 't the meeting, held in Feb of the year when the purh was fall of its terments! I this mother steeling peretine?



I will be out of town for the period $\frac{6/1/97}{1}$ through $\frac{9/20/97}{2}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

John Keddick Name 5 Mallard Lane

Please return completed form to:



I will be out of town for the period 5.14.47 through 10-1-47 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Name

725 A Lilar DR.

Street Address

Coldwater

City

ott 45828-1414

State/Zip Code

416-678-8520

Phone Number

Please return completed form to:



I will be out of town for the period MACH through SANU and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

DOROTHY RAMOND/

632 WASHINGTON ST D-6

BRAINTREE MA 02/84
City State/Zip Code

617-349 0462

Please return completed form to:



regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

ROBERT W. MELLO

235 TRAVIS CAY PL.

FT. PIERCE FL 34982-7924
City State/Zip Code

561- 489-2509

Please return completed form to:



I will be out of town for the period APRIL through Oct. and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:
Please Print Clearly
LEONARD RUSSO
Name _
27 SKELLEY AVE. Street Address

E. WEYMOUTH MASS. 02189
City State/Zip Code

1-617-335-5598

Please return completed form to:



I will be out of town for the period 4/1/97 through 10/15/97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Abe Sanger

P.O. Box 1674

Kingston NY 12402
City State/Zip Code

914) 338-3002

Please return completed form to:



I will be out of town for the period May 18 through Sept. 12 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly	
JAMES T. COLL Name	·
264 Old Key West Street Address	Place
Ft. Pierce	FL 34982
City	State/Zip Code
Phone Number	
Please return completed form to) :
Judy Lee Sweat	
Florida Water Services Corpora	tion
P.O. Box 609520	
Orlando, FL 32860-9520	



Please Print Clearly

Thomas P. GALAWAY

472 HEMINGWAY LERR

Fart P. +1 2100

 $\frac{|ORt||ORC||E||FL-3498L}{\text{City}}$ State/Zip Code

Phone Number

Please return completed form to:



Please Print Clearly

TONY JOANN CIMIN:

2206 LIBERTZ RA Street Address

SYKESVILLE md 21784

City State/Zip Code

410 - 795 8726 Phone Number

Please return completed form to:



I will be out of town for the period $\frac{5/3/97}{1/6/98}$ through $\frac{1/6/98}{1/6/98}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

1686 CRESCENT RD.
Street Address

PEXECRU 1/2 1/48
City State/Zip Code

518-383-6377 Phone Number

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

WHAT ABOUT WATER THAT IS USED FOR LAWN SPRINKLING WHEN FOR & MONTAS WE ARE ITT CUR Home IN NY. ?



custo	be out of town for the period through and will not be able to attend the ner meeting. Therefore, I request that the Public Service Commission forward information to me ling the proposed rate change for Tropical Isles. It may be sent to:	
Please	Print Clearly	
Name	etty Jarge/	
Street	Address And Any Plans	
H. Fress	State/Zip Code	
	9759 Number	
Please	return completed form to:	
Florida P.O. B	Water Services Corporation ox 609520 o, FL 32860-9520	
	I was some courts the moster	[
2~	Dunch degone in minimum	
Mr. Fr	The second se	



I will be out of town for the period $\frac{5/3\sqrt{97}}{1}$ through $\frac{1/3\sqrt{97}}{1}$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

GEORGE A PATTISIAN Name
314 Tropical Isles Circle
Street Address

FT. Pietce FLA 34972
City State/Zip Code

461-8393

Please return completed form to:



I will be out of town for the period 6/1/97 through 6/36 17 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Julius J. KosATO

Please return completed form to:



I will be out of town for the period 33-97 through and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:
Please Print Clearly 40415 BRUNO
% JOANN JOHNSTON
Name
5 Millet STREET
Street Address
11X H1/15 , 1.4 / State/Zip Code
516-243-2441 OR 516-669-7416 Phone Number

110T SUKE

Please return completed form to:



I will be out of town for the period <u>5-/0 97</u> through <u>10-/5 97</u> and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Name BY HI, TOX 194 A

200 SOUTH BUSIN PLACE

Street Address

EMERSON,

NE. 6

F. PHERCE

展、34152

ty State/Zip

1-402-695.2753

Phone Number

Please return completed form to:



I will be out of town for the period 11.11 through 12.11/97 and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

LAPIERRE HADRELCLAIRE

DXI DY K

Street Address

St. So PHIE JURISO Receter, CANADA

City State/Zip Code

1-514-57:5-9487

Phone Number

Please return completed form to:



I will be out of town for the period MAY through CCI, and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

E. R. GOODEMAN

220 ALMARY

Street Address

COLDWATER MKH 49036

Phone Number

Please return completed form to:



I will be out of town for the period $M \land Y \land GT$ through $SEPT \land GT$ and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

Name			
74 SECOND ST	T.		
Street Address			
KEYPORT	N.J.	07735	
City	State/Zip Code		

Please return completed form to:

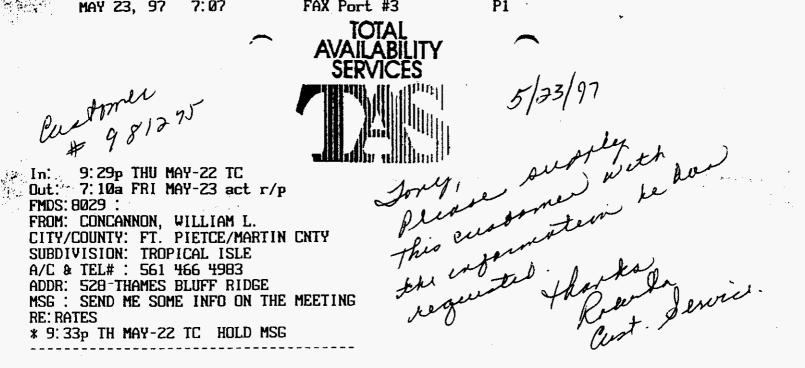
Phone Number



I will be out of town for the period				
customer meeting. Therefore, I re- regarding the proposed rate change				nformation to me
Please Print Clearly				
FRANK ZIGMI Name	91/			
2700 DOUGLAS Street Address				
ASHTABULA City	OHIO State/Zip C	44004 Code		
216-964-6330				

Please return completed form to:

Phone Number





I will be out of town for the period through cotoler and will not be able to attend the customer meeting. Therefore, I request that the Public Service Commission forward information to me regarding the proposed rate change for Tropical Isles. It may be sent to:

Please Print Clearly

JEAN-PIERRE. TSERTRANI)
Name

14 RUE SEGUIN
Street Address

St-ANDRE-AVELLIN-GC- JOV 1000 City State/Zip Code

819-983-7919

Please return completed form to:

Judy Lee Sweat Florida Water Services Corporation P.O. Box 609520 Orlando, FL 32860-9520

> I WOULD REALLY APPRECIATE TO BE CHARGED FOR GALLONAGE RATE INSTEAD OF A FLAT RATE MAINLY BECAUSE I WILL BE AT TROPICAL ISLE LESS THAN 6 MONTHS A YEAR

> > Joan Join Fred

BILLING ANALYSIS AND RATE SCHEDULES

Schedule E-14 - Billing Analysis Schedule WATER System: Tropical Isles Class: Residential

For Period: January-December 1996

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
						Consolidated	Consolidated	Cumulative
Consumption	Number	Cumulative	Consumed	Cumulative	Reversed	Gallons	Percentage	Percentage
Level	of Bills	Bills	Gallons	Gallons	Bills	(C1*C6)+C5	of Total	of Total
0	323	323	0	0	2,648	0	0.00%	0.00%
1,000	289	612	289,000	289,000	2,359	2,648,000	20.50%	2.24%
2,000	468	1,080	936,000	1,225,000	1,891	5,007,000	38.76%	9.48%
3,000	460	1,540	1,380,000	2,605,000	1,431	6,898,000	53.40%	20.17%
4,000	378	1,918	1,512,000	4,117,000	1,053	8,329,000	64.48%	31.87%
5,000	269	2,187	1,345,000	5,462,000	784	9,382,000	72.63%	42.28%
6,000	180	2,367	1,080,000	6,542,000	604	10,166,000	78.70%	50.64%
7,000	137	2,504	959,000	7,501,000	467	10,770,000	83.37%	58.07%
8,000	110	2,614	880,000	8,381,000	357	11,237,000	86.99%	64.88%
9,000	78	2,692	702,000	9,083,000	279	11,594,000	89.75%	70.31%
10,000	75	2,767	750,000	9,833,000	204	11,873,000	91.91%	76.12%
11,000	46	2,813	506,000	10,339,000	158	12,077,000	93.49%	80.04%
12,000	35	2,848	420,000	10,759,000	123	12,235,000	94.71%	83.29%
13,000	31	2,879	403,000	11,162,000	92	12,358,000	95.66%	86.41%
14,000	17	2,896	238,000	11,400,000	75	12,450,000	96.38%	88.25%
15,000	21	2,917	315,000	11,715,000	54	12,525,000	96.96%	90.69%
16,000	7	2,924	112,000	11,827,000	47	12,579,000	97.38%	91.55%
17,000	12	2,936	204,000	12,031,000	35	12,626,000	97.74%	93.13%
18,000	4	2,940	72,000	12,103,000	31	12,661,000	98.01%	93.69%
19,000	4	2,944	76,000	12,179,000	27	12,692,000	98.25%	94.28%
20,000	1	2,945	20,000	12,199,000	26	12,719,000	98.46%	94.43%
21,000	6	2,951	126,000	12,325,000	20	12,745,000	98.66%	95.41%
23,000	3	2,954	69,000	12,394,000	17	12,785,000	98.97%	95.94%
25,000	2	2,956	50,000	12,444,000	15	12,819,000	99.23%	96.33%
26,000	3	2,959	78,000	12,522,000	12	12,834,000	99.35%	96.93%
28,000	1	2,960	28,000	12,550,000	11	12,858,000	99.54%	97.15%
30,000	1	2,961	30,000	12,580,000	10	12,880,000	99.71%	97.38%

Schedule E-14 - Billing Analysis Schedule WATER System: Tropical Isles Class: Residential

For Period: January-December 1996

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Consumption Level	Number of Bills	Cumulative Bills	Consumed Gallons	Cumulative Gallons	Reversed Bills	Consolidated Gallons (C1*C6)+C5	Consolidated Percentage of Total	Cumulative Percentage of Total
31,000	3	2,964	93,000	12,673,000	7	12,890,000	99.78%	98.10%
32,000	2	2,966	64,000	12,737,000	5	12,897,000	99.84%	98.60%
33,000	2	2,968	66,000	12,803,000	3	12,902,000	99.88%	99.11%
34,000	1	2,969	34,000	12,837,000	2	12,905,000	99.90%	99.37%
40,000	1	2,970	40,000	12,877,000	1	12,917,000	99.99%	99.68%
41,000	1	2,971	41,000	12,918,000	0	12,918,000	100.00%	100.00%
Total	2,971		12,918,000					

Schedule of Rate Design Calculations - Wastewater

Company: Florida Water Services / St. Lucie / Tropical Isles

Docket No.: 970409-SU Schedule Year Ended 12/31/96 Water [] Wastewater [x] Interim [] Final [x] Historical [x] Projected [] Schedule: E1-2 Page 1 of 1 Preparer: Isaacs

Explanation: Provide a schedule of variables used in the proposed rate design.

Class es. WW Only	Meter Size 5/8" x 3/4"	1996 Bills 2,971	Meter Factor 1/ 1.0	Factored ERC's C3°C4 2,971	Billed Usage (MG) 10,166.000	Gallonage Factor	Factored Gallons (MG) C6°C7	Rates (C7,L8)*C4 \$15.65	Revenue	Gallor Rates (C7,L9)*C7 \$6.86	Revenue C6*C11 \$69,739
es. WW Only	Size	Bills 	Factor 1/	2,971	Usage (MG)	<u>Factor</u>	C6*C7	(C7,L8)*C4	C3*C9	Rates (C7,L9)*C7	Revenue C6*C11
·	5/8" x 3/4"		1.0		10,166.000	1.0	10,166.000	\$15.65	\$46,496	\$6.86	\$69,739
		2,971									
				2,971	10,166.000		10,166.000		\$46,496		\$69,739
96 Final Reven	nue Requireme	nt from FPS	C Order No.	PSC-96-132	20-FOF-WS	\$116,232				ue Requirement	\$116,232
argeted Revenu	es to be collect	ted through	Base Facility	y Charge (40	% of Rev. Req.)	\$46,493					\$116,235 \$3
rgeted Revenu	es to be collect	ted through	Gallonage C	harge (60%	of Rev. Req.)	\$69,739					
ase Facility Cha	rge (C7,L4)/(C	5,L2)				\$15.65					
allonage Charge	e (C7,L5)/(C8,L	.2)				\$6.86					
•						\$15.65					
arç as all	geted Revenu e Facility Cha lonage Charg BFC (no cha	geted Revenues to be collect e Facility Charge (C7,L4)/(C lonage Charge (C7,L5)/(C8,L BFC (no change)	geted Revenues to be collected through e Facility Charge (C7,L4)/(C5,L2) onage Charge (C7,L5)/(C8,L2)	geted Revenues to be collected through Gallonage C e Facility Charge (C7,L4)/(C5,L2) lonage Charge (C7,L5)/(C8,L2) BFC (no change)	geted Revenues to be collected through Gallonage Charge (60% e Facility Charge (C7,L4)/(C5,L2) lonage Charge (C7,L5)/(C8,L2) BFC (no change)	onage Charge (C7,L5)/(C8,L2) BFC (no change)	geted Revenues to be collected through Gallonage Charge (60% of Rev. Req.) e Facility Charge (C7,L4)/(C5,L2) lonage Charge (C7,L5)/(C8,L2) S6.86 BFC (no change) \$15.65	geted Revenues to be collected through Gallonage Charge (60% of Rev. Req.) e Facility Charge (C7,L4)/(C5,L2) onage Charge (C7,L5)/(C8,L2) BFC (no change) \$69,739 \$15.65	geted Revenues to be collected through Gallonage Charge (60% of Rev. Req.) e Facility Charge (C7,L4)/(C5,L2) onage Charge (C7,L5)/(C8,L2) BFC (no change) \$69,739 \$15.65	geted Revenues to be collected through Base Facility Charge (40% of Rev. Req.) \$46,493 Amount over/(geted Revenues to be collected through Gallonage Charge (60% of Rev. Req.) \$69,739 e Facility Charge (C7,L4)/(C5,L2) \$15.65 onage Charge (C7,L5)/(C8,L2) \$6.86 BFC (no change) \$15.65	geted Revenues to be collected through Gallonage Charge (60% of Rev. Req.) e Facility Charge (C7,L4)/(C5,L2) sonage Charge (C7,L5)/(C8,L2) BFC (no change) \$15.65

^{1/} Meter factors are standard AWWA rate design meter factors.

SCHEDULE YEAR REVENUE CALCULATION - 1996

(1)

Company: Florida Water Services / St. Lucie / Tropical Isles

Docket No: 970409-SU

Schedule Year Ended: 12/31/96

Water[] Wastewater[x] Historical[x] Projected[] Schedule E2-1 Page 1 of 1 Preparer: Isaacs

(6)

(7)

(5)

(4)

Explanation: Provide a calculation of revenues at present and proposed rates using the billing analysis. (2)

REVENUES Line Consumption At Present Rates At Proposed Rates <u>No.</u> Class/Meter Size No. of Bills (000s)Revenue Revenue <u>Rates</u> <u>Rates</u> Residential WW Only 1 2 5/8 x 3/4" 2,971 \$35.50 \$105,471 \$15.65 \$46,496 Gallonage Charge/MG: 3 0 - 6,000 \$0.00 4 10,166.000 \$0 \$6.86 \$69,739

(3)

5 All Excess 2,752.000 \$0.00 \$0 \$0.00 2,971 6 Total 12,918.000 \$105,471 \$116,235 7 **GRAND TOTAL** 2,971 12,918.000 \$105,471 \$116,235