STAT WE RIGINAL OK# 1350 525 JAN 27 200 APPLICATION FOR GRANDFATHER CERTIFICATE CK\$ 400.00 1-26-05 (Pursuant to Section 2367 M19107 Florida Statutes) RT Director, Division of the Commission Clerk & Administrative Services To: Florida Public Service Commission 2540 Shumard Oak Boulevard )50061-WS Tallahassee, Florida 32399-0850 The undersigned hereby makes application for original certificate(s) to operate a water \_\_\_\_\_\_ and/or wastewater \_\_\_\_\_ utility in OKee cho bee County, Florida, and submits the following information: APPLICANT INFORMATION PART I The full name (as it appears on the certipicate A) address and telephone number of the applicant: Pine Ridge lanagement Name of utility (863) 699-1582 Phone No. irele Office street address <u>33852</u> Zip Code lacid FL Lake 3381 Box 307 Lake Placid Mailing address if different from street address CMP COM Internet address if applicable CTR \_\_\_\_\_ B) The name, address and telephone number of the person to ECR contact concerning this application: GCL \_ Gadsden (863) 699-1582 OPC Phone No. MMS\_\_\_\_\_ OX RCA ake Placid, FL SCR\_ SEC City Check received with filing and forwarded OTH PSC/ECR 014-R (Rev. 2/91) to Fiscal for deposit. Fiscal to forward deposit information to Records. is of person who forwarded check DOCUMENT NUMBER-DATE 00949 JAN 26 8

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