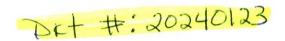
Deposit Number Deposit Date 0 0 0 7 5 0 AUG 1 5 2024 FLORIDA UTILITY SERVICES 1, LLC 5911 TROUBLE CREEK RD. NEW PORT RICHEY, FL. 34652

863-904-5574

August 13, 2024



Commission Clerk Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL. 32399

Re: Docket # 20240089

Dear Commission Clerk:

Enclosed please find an Application for a Grandfather certificate in Columbia County.

On behalf of the utility,

met

Mike Smallridge

COMMISSION

1

FILED 8/15/2024 DOCUMENT NO. 08460-2024 FPSC - COMMISSION CLERK

Amnt: \$750.00 CK Date: 08/13/24

CK#: 2152

3

XH

APPLICATION FOR ORIGINAL CERTIFICATE FOLLOWING RESCISSION OF JURISDICTION BY A COUNTY (GRANDFATHER CERTIFICATE)

1

(Pursuant to Section 367.171, Florida Statutes, and Rule 25-30.035, Florida Administrative Code)

To: Office of Commission Clerk Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850

The undersigned hereby makes application for original certificate(s) to operate a water \square and/or wastewater \square utility in <u>Columbia</u> County, Florida, and submits the following information:

PART I APPLICANT INFORMATION

A) <u>Contact Information for Utility</u>. The utility's name, address, telephone number, Federal Employer Identification Number, and if applicable, fax number, e-mail address, and website address. The utility's name should reflect the business and/or fictitious name(s) registered with the Department of State's Division of Corporations:

Suwannee Valley Utilities, LLC 5911 Troyble Creek Rd Office Street Address Arw Port Richer Fl 34652_ City State Zip Code Mailing Address (if different from Street Address) <u>n/r</u> City State <u>Zip Code</u> BSB 30-2 7406 () - 1/A Phone Number Fax Number <u>82 - 159 / 837</u> Federal Employer Identification Number Records & fusILLC.com

E-Mail Address

Website Address

N/A-

1

B) The contact information of the authorized representative to contact concerning this application:

| Michael Smallridge |
|---|
| Name |
| 5911 Trouble Creek Rd |
| Mailing Address |
| New Port Richey FL 34652 City State Zip Code |
| City / State Zip Code |
| 352,302 7406 () - N/A. |
| Phone Number Fax Number |
| mike & fus ILLC. Com |
| E-Mail Address |

C) Indicate the nature of the utility's business organization (check one). Provide documentation from the Florida Department of State, Division of Corporations, showing the utility's business name and registration/document number for the business, unless operating as a sole proprietor.

| Corporation | | |
|-------------------------------|--------------|--|
| Limited Liability Company | L17060108666 | |
| | Number | |
| Partnership | | |
| | Number | |
| Limited Partnership | | |
| | Number | |
| Limited Liability Partnership | | |
| | Number | |
| Sole Proprietorship | | |
| | | |
| Association | | |
| Other (Specify) | | |