

**CLASS "C"**

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**Public Service Commission**  
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**WATER AND/OR WASTEWATER UTILITIES**

(Gross Revenue of Less Than \$200,000 Each)

**ANNUAL REPORT**

WS955-14-AR

**CAP UTILITIES, LLC**

Exact Legal Name of Respondent

\_\_\_\_\_  
Certificate Number(s)

Submitted To The

**STATE OF FLORIDA**

**PUBLIC SERVICE COMMISSION**

FOR THE

**YEAR ENDED DECEMBER 31, 2014**

Form PSC/ECR 006-W (Rev. 12/99)

RECEIVED  
FLORIDA PUBLIC SERVICE  
COMMISSION  
15 MAR 30 AM 6:55  
DIVISION OF  
ACCOUNTING & FINANCE

## GENERAL INSTRUCTIONS

1. Prepare this report in conformity with the 1996 National Association of Regulatory Utility Commissioners (NARUC) Uniform System of Accounts for Water and Wastewater Utilities as adopted by Rule 25-30.115 (1), Florida Administrative Code.
2. Interpret all accounting words and phrases in accordance with the Uniform System of Accounts (USOA). Commission Rules and the definitions on next page.
3. Complete each question fully and accurately, even if it has been answered in a previous annual report. Enter the word "None" where it truly and completely states the fact.
4. For any question, section, or page which is not applicable to the respondent enter the words "Not Applicable." Do not omit any pages.
5. Where dates are called for, the month and day should be stated as well as the year.
6. All schedules requiring dollar entries should be rounded to the nearest dollar.
7. Complete this report by means which result in a permanent record. You may use permanent ink or a typewriter. Do not use a pencil.
8. If there is not enough room on any schedule, an additional page or pages may be added provided the format of the added schedule matches the format of the schedule in the report. Additional pages should reference the appropriate schedules, state the name of the utility, and state the year of the report.
9. If it is necessary or desirable to insert additional statements for the purpose of further explanation of schedules, such statements should be made at the bottom of the page or on an additional page. Any additional pages should state the name of the utility and the year of the report, and reference the appropriate schedule.
10. The utility shall file the original and two copies of the report with the Commission at the address below, and keep a copy for itself. Pursuant to Rule 25-30.110 (3), Florida Administrative Code, the utility must submit the report by March 31 for the preceeding year ending December 31.

Florida Public Service Commission  
Division of Economic Regulation  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

11. Pursuant to Rule 25-30.110 (7) (a), Florida Administrative Code, any utility that fails to file its annual report or extension on or before March 31, or within the time specified by any extension approved in writing by the Division of Economic Regulation, shall be subject to a penalty. The penalty shall be based on the number of calendar days elapsed from March 31, or from an approved extended filing date, until the date of filing. The date of filing shall be included in the days elapsed.

**Reconciliation of Revenue to  
Regulatory Assessment Fee Revenue  
Water Operations  
Class C**

**Company: CAP Utilities, LLC**

**For the Year Ended December 31, 2014**

(a)	(b)	(c)	(d)
Accounts	Gross Water Revenues Per Sch. F-3	Gross Water Revenues Per RAF Return	Difference <sup>1</sup> (b) - (c)
Gross Revenue:			
Residential	\$ 55,316.19	\$ 55,316.19	\$ -
Commercial	5,487.09	5,487.09	-
Industrial			-
Multiple Family			-
Guaranteed Revenues			-
Other	3.00		3.00
<b>Total Water Operating Revenue</b>	<b>\$ 60,806.28</b>	<b>\$ 60,803.28</b>	<b>\$ 3.00</b>
<b>LESS: Expense for Purchased Water from FPSC-Regulated Utility</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Net Water Operating Revenues</b>	<b>\$ 60,806.28</b>	<b>\$ 60,803.28</b>	<b>\$ 3.00</b>

Explanations:

Instructions:

For the current year, reconcile the gross water revenues reported on Schedule F-3 with the gross water revenues reported on the company's regulatory assessment fee return. Explain any differences reported in column (d).

**Reconciliation of Revenue to  
Regulatory Assessment Fee Revenue  
Wastewater Operations  
Class C**

**Company: CAP Utilities, LLC**

**For the Year Ended December 31, 2012**

(a)	(b)	(c)	(d)
Accounts	Gross Wastewater Revenues Per Sch. F-3	Gross Wastewater Revenues Per RAF Return	Difference (b) - (c)
Gross Revenue:			
Residential	\$ 55,463.65	\$ 55,463.65	\$ -
Commercial	4,181.06	4,181.06	-
Industrial			-
Multiple Family			-
Guaranteed Revenues			-
Other	2.00	-	2.00
<b>Total Wastewater Operating Revenue</b>	<b>\$ 59,646.71</b>	<b>\$ 59,644.71</b>	<b>\$ 2.00</b>
<b>LESS: Expense for Purchased Wastewater from FPSC-Regulated Utility</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>Net Wastewater Operating Revenues</b>	<b>\$ 59,646.71</b>	<b>\$ 59,644.71</b>	<b>\$ 2.00</b>

Explanations:

Instructions:

For the current year, reconcile the gross water revenues reported on Schedule F-3 with the gross water revenues reported on the company's regulatory assessment fee return. Explain any differences reported in column (d).

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# FINANCIAL SECTION

REPORT OF  
CAP UTILITIES, LLC  
(EXACT NAME OF UTILITY)

3500 W. Lantana Road, Lantana, FL 33462 Palm Beach  
 Mailing Address Street Address County

Telephone Number (813) 999-8990 Date Utility First Organized November, 2011

Fax Number (813) 644-6952 E-mail Address accounting@cal-am.com

Sunshine State One-Call of Florida, Inc. Member # CA2104

Check the business entity of the utility as filed with the Internal Revenue Service:

Individual  Sub Chapter S Corporation  1120 Corporation  Partnership

Name, Address and phone where records are located: 3500 W. Lantana Road, Lantana, FL 33462

Name of subdivisions where services are provided: Palm Breezes Club

CONTACTS:

Name	Title	Principle Business Address	Salary Charged Utility
Person to send correspondence: Sheilla Tannert	Regional Manager	3500 W Lantana Road, Lantana FL 33462	
Person who prepared this report: Deborah D. Swain	Milian, Swain & Associates, Inc.	2025 SW 32nd Ave Miami, FL 33145	
Officers and Managers: Cory S Sukert	President, Cal-Am Properties	385 Clinton Street Costa Mesa CA 92626	\$ N/A
			\$
			\$

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principle Business Address	Salary Charged Utility
Cal-Am Properties, Inc.	100 %	385 Clinton Street Costa Mesa CA 92626	\$ N/A
			\$
			\$
			\$

**INCOME STATEMENT**

Account Name	Ref. Page	Water	Wastewater	Other	Total Company
<b>Gross Revenue:</b>					
Residential_____		\$ 55,316	55,464	\$ _____	\$ 110,780
Commercial_____		5,487	4,181	_____	9,668
Industrial_____		_____	_____	_____	_____
Multiple Family_____		_____	_____	_____	_____
Guaranteed Revenues_		_____	_____	_____	_____
Other - Miscellaneous		3	2	_____	5
<b>Total Gross Revenue</b> _____		<b>\$ 60,806</b>	<b>\$ 59,647</b>	<b>\$ _____</b>	<b>\$ 120,453</b>
<b>Operation Expense (Must tie to pages W-3 and S-3)</b>					
	W-3 S-3	\$ 76,551	\$ 61,763	\$ _____	\$ 138,314
Depreciation Expense_____	F-5	2,346	5,871	_____	8,217
CIAC Amortization Expense_	F-8	(984)	(372)	_____	(1,356)
Taxes Other Than Income__	F-7	3,753	3,701	_____	7,454
Income Taxes_____	F-7	_____	_____	_____	_____
<b>Total Operating Expense</b>		<b>\$ 81,666</b>	<b>70,963</b>	<b>_____</b>	<b>\$ 152,629</b>
<b>Net Operating Income (Loss)</b>		<b>\$ (20,859)</b>	<b>\$ (11,316)</b>	<b>\$ _____</b>	<b>\$ (32,176)</b>
<b>Other Income:</b>					
Nonutility Income_____		\$ _____	_____	\$ _____	\$ 0
_____		_____	_____	_____	_____
_____		_____	_____	_____	_____
<b>Other Deductions:</b>					
Miscellaneous Nonutility Expenses_____		\$ _____	_____	\$ _____	\$ 0
Interest Expense_____		_____	_____	_____	_____
Acquisition Adj Amort Exp		108	(10)	_____	98
_____		_____	_____	_____	_____
_____		_____	_____	_____	_____
<b>Net Income (Loss)</b>		<b>\$ (20,751)</b>	<b>\$ (11,326)</b>	<b>\$ _____</b>	<b>\$ (32,078)</b>



COMPARATIVE BALANCE SHEET

ACCOUNT NAME	Reference Page	Current Year	Previous Year
<b>Assets:</b>			
Utility Plant in Service (101-105) -----	F-5,W-1,S-1	\$ <u>293,095</u>	\$ <u>293,095</u>
Accumulated Depreciation and Amortization (108)-----	F-5,W-2,S-2	<u>223,110</u>	<u>214,893</u>
Net Utility Plant -----		\$ <u>69,985</u>	\$ <u>78,202</u>
Cash -----		<u>480</u>	<u>333</u>
Customer Accounts Receivable (141)-----		<u>19,623</u>	<u>21,273</u>
Other Assets (Specify):-----			
Utility Deposit (City of Lake Worth)		<u>9,052</u>	<u>9,052</u>
Acquisition Adjustment		<u>(2,741)</u>	<u>(2,741)</u>
Amortization Acquisition Adjustment		<u>294</u>	<u>196</u>
<b>Total Assets</b> -----		\$ <u>96,693</u>	\$ <u>106,315</u>
<b>Liabilities and Capital:</b>			
Common Stock Issued (201)-----	F-6	<u>0</u>	<u>0</u>
Preferred Stock Issued (204)-----	F-6		
Other Paid in Capital (211)-----		<u>77,500</u>	<u>77,500</u>
Retained Earnings (215)-----	F-6	<u>(49,173)</u>	<u>(17,095)</u>
Proprietary Capital (Proprietary and partnership only) (218)-----	F-6		
Total Capital -----		\$ <u>28,327</u>	\$ <u>60,405</u>
Long Term Debt (224)-----	F-6	\$ <u>0</u>	\$ <u>0</u>
Accounts Payable (231)-----		<u>8,803</u>	<u>8,991</u>
Notes Payable (232)-----		<u>52,000</u>	<u>28,000</u>
Customer Deposits (235)-----			
Accrued Taxes (236)-----	F-7		
Other Liabilities (Specify)-----			
<b>Rounding</b>			
Advances for Construction-----			
Contributions in Aid of Construction - Net (271-272)-----	F-8	<u>7,563</u>	<u>8,919</u>
Total Liabilities and Capital -----		\$ <u>96,693</u>	\$ <u>106,315</u>

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
--

**GROSS UTILITY PLANT**

Plant Accounts: (101 - 107) inclusive	Water	Wastewater	Plant other Than Reporting Systems	Total
Utility Plant in Service	\$ 118,810	\$ 174,285	\$ _____	\$ 293,095
-----				
Construction Work in -----	_____	_____	_____	_____
Other (Specify) (rounding)	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>Total Utility Plant</b> _____	<b>\$ 118,810</b>	<b>\$ 174,285</b>	<b>\$ 0</b>	<b>\$ 293,095</b>

**ACCUMULATED DEPRECIATION (A/D) AND AMORTIZATION OF UTILITY PLANT**

Account 108	Water	Wastewater	Other Than Reporting Systems	Total
Balance First of Year_____	\$ 95,477	\$ 119,416	\$ _____	\$ 214,893
<u>Add Credits During Year:</u>				
Accruals charged to depreciation account____	\$ 2,346	\$ 5,871	\$ _____	\$ 8,217
_____				
<b>Total Credits</b> _____	<b>\$ 2,346</b>	<b>\$ 5,871</b>	<b>\$ 0</b>	<b>\$ 8,217</b>
<u>Deduct Debits During Year:</u>				
Book cost of plant retired_____	\$ 0	\$ 0	\$ _____	\$ 0
Cost of removal_____	_____	_____	_____	_____
Other debits (reclass plant)	_____	_____	_____	_____
_____				0
<b>Total Debits</b> _____	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>
Balance End of Year_____	<b>\$ 97,823</b>	<b>\$ 125,287</b>	<b>\$ 0</b>	<b>\$ 223,110</b>

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
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CAPITAL STOCK ( 201 - 204 )

	Common Stock	Preferred Stock
Par or stated value per share_____	_____	N/A
Shares authorized_____	_____	N/A
Shares issued and outstanding_____	_____	N/A
Total par value of stock issued_____	_____	N/A
Dividends declared per share for year_____	N/A	N/A

RETAINED EARNINGS ( 215 )

	Appropriated	Un- Appropriated
Balance first of year_____	\$ _____	\$ (17,095)
Changes during the year (Specify):		
Prior Year adjustments	_____	_____
Balance transferred from Income Statement_____	_____	(32,078)
Rounding_____	_____	_____
_____	_____	_____
Balance end of year_____	\$ _____	\$ (49,173)

PROPRIETARY CAPITAL ( 218 )

	Proprietor Or Partner	Partner
Balance first of year_____	\$ _____	\$ _____
Changes during the year (Specify):		
_____	_____	_____
_____	_____	_____
Balance end of year_____	\$ _____	\$ _____

LONG TERM DEBT ( 224 )

Description of Obligation (Including Date of Issue and Date of Maturity):	Interest		Principal per Balance Sheet Date
	Rate	# of Pymts	
_____	_____	_____	_____
_____	_____	_____	_____
Total_____			\$ 0

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
--

**TAX EXPENSE**

(a)	Water (b)	Wastewater (c)	Other (d)	Total (e)
Income Taxes:				
Federal income tax _____	\$ _____	\$ _____	\$ _____	\$ _____
State income Tax _____	_____	_____	_____	_____
Taxes Other Than Income:				
State ad valorem tax _____	_____	_____	_____	_____
Local property tax _____	1,017	1,017	_____	2,034
Regulatory assessment fee _____	2,736	2,684	_____	5,420
Other (Specify) _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>Total Tax Expense _____</b>	<b>\$ 3,753</b>	<b>\$ 3,701</b>	<b>\$ 0</b>	<b>\$ 7,454</b>

**PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES**

Report all information concerning outside rate, management, construction, advertising, labor relations, public relations, or other similar professional services rendered the respondent for which aggregate payments during the year to any corporation, partnership, individual, or organization of any kind whatever amounting to \$500 or more.

Name of Recipient	Water Amount	Wastewater Amount	Description of Service
Milian Swain & Associates	\$ 1,512	1,512	Professional Services
Park Billing Company	\$ 972	972	Billing Services
Cal-AM Properties	\$ 6,000	6,000	Accounting Services
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
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**CONTRIBUTIONS IN AID OF CONSTRUCTION ( 271 )**

(a)	Water (b)	Wastewater (c)	Total (d)
1) Balance first of year _____	\$ 28,774	11,010	\$ 39,784
2) Add credits during year _____	\$ _____	_____	\$ _____
3) <b>Total</b> _____	<b>28,774</b>	<b>11,010</b>	<b>39,784</b>
4) Deduct charges during the year _____	_____	_____	_____
5) Balance end of year _____	28,774	11,010	39,784
6) Less Accumulated Amortization _____	(24,789)	(7,432)	(32,221)
7) Net CIAC _____	\$ 3,985	\$ 3,578	\$ 7,563

**ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)**

Report below all developers or contractors agreements from which cash or property was received during the year.	Indicate "Cash" or "Property"	Water	Wastewater
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Sub-total _____	_____	\$ _____	\$ _____
Report below all capacity charges, main extension charges and customer connection charges received during the year.			
Description of Charge	Number of Connections	Charge per Connection	
_____	_____	\$ _____	\$ _____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Credits During Year (Must agree with line # 2 above.) _____		\$ _____	\$ _____

**ACCUMULATED AMORTIZATION OF CIAC (272)**

	Water	Wastewater	Total
Balance First of Year _____	\$ (23,805)	\$ (7,060)	(30,865)
Add Credits During Year: _____	(984)	(372)	(1,356)
Adjustments _____	_____	_____	0
Deduct Debits During Year: _____	_____	_____	0
Balance End of Year (Must agree with line #6 above.)	\$ (24,789)	\$ (7,432)	\$ (32,221)

**\*\* COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR \*\***

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
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**SCHEDULE "A"**

**SCHEDULE OF COST OF CAPITAL USED FOR AFUDC CALCULATION (1)**

Class of Capital (a)	Dollar Amount (b)	Percentage of Capital (c)	Actual Cost Rates (d)	Weighted Cost [ c x d ] (e)
Common Equity	\$ _____	_____ %	_____ %	_____ %
Preferred Stock	_____	_____ %	_____ %	_____ %
Long Term Debt	_____	_____ %	_____ %	_____ %
Customer Deposits	_____	_____ %	_____ %	_____ %
Tax Credits - Zero Cost	_____	_____ %	0.00 %	_____ %
Tax Credits - Weighted Cost	_____	_____ %	_____ %	_____ %
Deferred Income Taxes	_____	_____ %	_____ %	_____ %
Other (Explain)	_____	_____ %	_____ %	_____ %
<b>Total</b>	<b>\$ <u>      N/A      </u></b>	<b><u>      100.00      </u> %</b>		<b><u>      N/A      </u> %</b>

(1) Must be calculated using the same methodology used to calculate AFUDC rate approved by the Commission.

**APPROVED AFUDC RATE**

Current Commission approved AFUDC rate:	_____ %
Commission Order Number approving AFUDC rate:	_____

**\*\* COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR \*\***

**UTILITY NAME: CAP UTILITIES, LLC.**

<p align="center">YEAR OF REPORT December 31, 2014</p>
--

**SCHEDULE "B"**

**SCHEDULE OF CAPITAL STRUCTURE ADJUSTMENTS**

Class of Capital (a)	Per Book Balance (b)	Non-utility Adjustments (c)	Non-juris. Adjustments (d)	Other (1) Adjustments (e)	Capital Structure Used for AFUDC Calculation (f)
Common Equity	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Preferred Stock	_____	_____	_____	_____	_____
Long Term Debt	_____	_____	_____	_____	_____
Customer Deposits	_____	_____	_____	_____	_____
Tax Credits-Zero Cost	_____	_____	_____	_____	_____
Tax Credits-Weighted	_____	_____	_____	_____	_____
Cost of Capital	_____	_____	_____	_____	_____
Deferred Income Taxes	_____	_____	_____	_____	_____
Other (Explain)	_____	_____	_____	_____	_____
<b>Total</b>	\$ _____	\$ _____	\$ _____	\$ _____	\$ <u>N/A</u>

(1) Explain below all adjustments made in Column (e):

<p><u>NO AFUDC CHARGED DURING THE YEAR.</u></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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**WATER  
OPERATING  
SECTION**

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**WATER UTILITY PLANT ACCOUNTS**

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
301	Organization_____	\$ 7,698	\$ _____	\$ _____	\$ 7,698
302	Franchises_____	_____	_____	_____	_____
303	Land and Land Rights_____	_____	_____	_____	_____
304	Structures and Improvements_____	_____	_____	_____	_____
305	Collecting and Impounding Reservoirs_____	_____	_____	_____	_____
306	Lake, River and Other Intakes_____	_____	_____	_____	_____
307	Wells and Springs_____	_____	_____	_____	_____
308	Infiltration Galleries and Tunnels_____	_____	_____	_____	_____
309	Supply Mains_____	_____	_____	_____	_____
310	Power Generation Equipment_____	_____	_____	_____	_____
311	Pumping Equipment_____	_____	_____	_____	_____
320	Water Treatment Equipment_____	_____	_____	_____	_____
330	Distribution Reservoirs and Standpipes_____	_____	_____	_____	_____
331	Transmission and Distribution Lines_____	50,778	_____	_____	50,778
333	Services_____	23,043	_____	_____	23,043
334	Meters and Meter Installations_____	25,811	_____	_____	25,811
335	Hydrants_____	11,058	_____	_____	11,058
336	Backflow Prevention Devices_____	_____	_____	_____	_____
339	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
340	Office Furniture and Equipment_____	0	_____	_____	0
341	Transportation Equipment_____	_____	_____	_____	_____
342	Stores Equipment_____	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
344	Laboratory Equipment_____	_____	_____	_____	_____
345	Power Operated Equipment_____	_____	_____	_____	_____
346	Communication Equipment_____	_____	_____	_____	_____
347	Miscellaneous Equipment_____	_____	_____	_____	_____
348	Other Tangible Plant_____	422	_____	_____	422
	<b>Total Water Plant_____</b>	<b>\$ 118,810</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 118,810 *</b>

\* This amount should tie to sheet F-5.

**ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WATER**

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
301	Organization_____	40.0	%	2.50 %	\$ 7,633	\$ _____	\$ 65	\$ 7,698
304	Structures and Improvements_____	_____	%	%	_____	_____	_____	_____
305	Collecting and Impounding Reservoirs_____	_____	%	%	_____	_____	_____	_____
308	Lake, River and Other Intakes_____	_____	%	%	_____	_____	_____	_____
307	Wells and Springs_____	_____	%	%	_____	_____	_____	_____
308	Infiltration Galleries & Tunnels_____	_____	%	%	_____	_____	_____	_____
309	Supply Mains_____	_____	%	%	_____	_____	_____	_____
310	Power Generating Equipment_____	_____	%	%	_____	_____	_____	_____
311	Pumping Equipment_____	_____	%	%	_____	_____	_____	_____
320	Water Treatment Equipment_____	_____	%	%	_____	_____	_____	_____
330	Distribution Reservoirs & Standpipes_____	_____	%	%	_____	_____	_____	_____
331	Trans. & Dist. Mains_____	38.0	%	2.63 %	33,606	_____	1,335	34,941
333	Services_____	35.0	%	2.86 %	18,083	_____	659	18,742
334	Meter & Meter Installations_____	17.0	%	5.88 %	25,811	_____	_____	25,811
335	Hydrants_____	40.0	%	2.50 %	10,291	_____	276	10,567
336	Backflow Prevention Devices_____	_____	%	%	_____	_____	_____	_____
339	Other Plant and Miscellaneous Equipment_____	_____	%	%	_____	_____	_____	_____
340	Office Furniture and Equipment_____	6.0	%	16.67 %	-	_____	_____	-
341	Transportation Equipment_____	_____	%	%	_____	_____	_____	_____
342	Stores Equipment_____	_____	%	%	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment_____	_____	%	%	_____	_____	_____	_____
344	Laboratory Equipment_____	_____	%	%	_____	_____	_____	_____
345	Power Operated Equipment_____	_____	%	%	_____	_____	_____	_____
346	Communication Equipment_____	_____	%	%	_____	_____	_____	_____
347	Miscellaneous Equipment_____	_____	%	%	_____	_____	_____	_____
	Other - Organization_____	40.0	%	2.50 %	53	_____	11	64
	Totals_____	_____	_____	_____	\$ 95,477	\$ -	\$ 2,346	\$ 97,823 *

\* This amount should tie to Sheet F-5.

**WATER OPERATION AND MAINTENANCE EXPENSE**

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees_____	\$ 4,339
603	Salaries and Wages - Officers, Directors, and Majority Stockholders_____	_____
604	Employee Pensions and Benefits_____	1,043
610	Purchased Water_____	56,670
615	Purchased Power_____	_____
616	Fuel for Power Production_____	_____
618	Chemicals_____	_____
620	Materials and Supplies_____	3,547
630	Contractual Services:	_____
	Billing_____	972
	Professional_____	1,512
	Other_____	_____
	Accounting Services_____	6,000
640	Rents_____	_____
650	Transportation Expense_____	_____
655	Insurance Expense_____	1,086
665	Regulatory Commission Expenses (Amortized Rate Case Expense)_____	_____
670	Bad Debt Expense_____	_____
675	Miscellaneous Expenses_____	1,383
	Total Water Operation And Maintenance Expense_____	\$ 76,551 *

\* This amount should tie to Sheet F-3.

**WATER CUSTOMERS**

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Meter Equivalents (c x e) (f)
			Start of Year (d)	End of Year (e)	
<b>Residential Service</b>					
5/8"	D	1.0	189	189	189
3/4"	D	1.5	_____	_____	_____
1"	D	2.5	_____	_____	_____
1 1/2"	D,T	5.0	_____	_____	_____
<b>General Service</b>					
5/8"	D	1.0	1	1	1
3/4"	D	1.5	_____	_____	_____
1"	D	2.5	_____	_____	_____
1 1/2"	D,T	5.0	_____	_____	_____
2"	D,C,T	8.0	_____	_____	_____
3"	D	15.0	_____	_____	_____
3"	C	16.0	_____	_____	_____
3"	T	17.5	_____	_____	_____
Unmetered Customers	_____	_____	_____	_____	_____
Other (Specify)	_____	_____	_____	_____	_____
** D = Displacement C = Compound T = Turbine			<b>Total</b>	<b>190</b>	<b>190</b>

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
--

**PUMPING AND PURCHASED WATER STATISTICS**

(a)	(b) Water Purchased For Resale (Omit 000's)	(c) Finished Water From Wells (Omit 000's)	(d) Recorded Accounted For Loss Through Line Flushing Etc. (Omit 000's)	(e) Total Water Pumped And Purchased (Omit 000's) [ (b)+(c)-(d) ]	(f) Water Sold To Customers (Omit 000's)
January_____	385	_____	_____	385	559
February_____	468	_____	_____	468	515
March_____	387	_____	_____	387	670
April_____	309	_____	_____	309	494
May_____	274	_____	_____	274	461
June_____	241	_____	_____	241	438
July_____	275	_____	_____	275	469
August_____	261	_____	_____	261	450
September_____	307	_____	_____	307	383
October_____	307	_____	_____	307	457
November_____	377	_____	_____	377	455
December_____	457	_____	_____	457	507
<b>Total for Year_____</b>	<b>4,048</b>	<b>_____</b>	<b>_____</b>	<b>4,048</b>	<b>5,858</b>

If water is purchased for resale, indicate the following:  
 Vendor City of Lake Worth  
 Point of delivery 3500 W. Lantana Road, Lantana FL 33462

If water is sold to other water utilities for redistribution, list names of such utilities below:  
Not applicable

**MAINS (FEET)**

Kind of Pipe (PVC, Cast Iron, Coated Steel, etc.)	Diameter of Pipe	First of Year	Added	Removed or Abandoned	End of Year
Poly	8"	2,085	_____	_____	2,085
PVC	6"	7,140	_____	_____	7,140
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
--

**SYSTEM NAME:** \_\_\_\_\_

**WELLS AND WELL PUMPS**

**N/A**

(a)	(b)	(c)	(d)	(e)
Year Constructed _____	_____	_____	_____	_____
Types of Well Construction and Casing _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Depth of Wells _____	_____	_____	_____	_____
Diameters of Wells _____	_____	_____	_____	_____
Pump - GPM _____	_____	_____	_____	_____
Motor - HP _____	_____	_____	_____	_____
Motor Type * _____	_____	_____	_____	_____
Yields of Wells in GPD _____	_____	_____	_____	_____
Auxiliary Power _____	_____	_____	_____	_____
* Submersible, centrifugal, etc.				

**RESERVOIRS**

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	_____	_____	_____	_____
Capacity of Tank _____	_____	_____	_____	_____
Ground or Elevated _____	_____	_____	_____	_____

**HIGH SERVICE PUMPING**

(a)	(b)	(c)	(d)	(e)
<u>Motors</u>				
Manufacturer _____	_____	_____	_____	_____
Type _____	_____	_____	_____	_____
Rated Horsepower _____	_____	_____	_____	_____
<u>Pumps</u>				
Manufacturer _____	_____	_____	_____	_____
Type _____	_____	_____	_____	_____
Capacity in GPM _____	_____	_____	_____	_____
Average Number of Hours Operated Per Day _____	_____	_____	_____	_____
Auxiliary Power _____	_____	_____	_____	_____

**UTILITY NAME: CAP UTILITIES, LLC.**

**YEAR OF REPORT**  
December 31, 2014

**SOURCE OF SUPPLY**

N/A

List for each source of supply ( Ground, Surface, Purchased Water etc. )			
Permitted Gals. per day_____	_____	_____	_____
Type of Source_____	_____	_____	_____

**WATER TREATMENT FACILITIES**

N/A

List for each Water Treatment Facility:			
Type_____	_____	_____	_____
Make_____	_____	_____	_____
Permitted Capacity (GPD)_____	_____	_____	_____
High service pumping	_____	_____	_____
Gallons per minute_____	_____	_____	_____
Reverse Osmosis_____	_____	_____	_____
Lime Treatment	_____	_____	_____
Unit Rating_____	_____	_____	_____
Filtration	_____	_____	_____
Pressure Sq. Ft._____	_____	_____	_____
Gravity GPD/Sq.Ft._____	_____	_____	_____
Disinfection	_____	_____	_____
Chlorinator_____	_____	_____	_____
Ozone_____	_____	_____	_____
Other_____	_____	_____	_____
Auxiliary Power_____	_____	_____	_____

**UTILITY NAME: CAP UTILITIES, LLC.**

**YEAR OF REPORT**  
December 31, 2014

**SYSTEM NAME:** \_\_\_\_\_

**GENERAL WATER SYSTEM INFORMATION**

Furnish information below for each system. A separate page should be supplied where necessary.

- 1. Present ERC's \* the system can efficiently serve. 42
- 2. Maximum number of ERCs \* which can be served. 42
- 3. Present system connection capacity (in ERCs \*) using existing lines. 42
- 4. Future connection capacity (in ERCs \*) upon service area buildout. 42
- 5. Estimated annual increase in ERCs \*. 0
- 6. Is the utility required to have fire flow capacity? 6" - 8" Fire hydrants with valve and box  
If so, how much capacity is required? \_\_\_\_\_
- 7. Attach a description of the fire fighting facilities.
- 8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 9. When did the company last file a capacity analysis report with the DEP? N/A
- 10. If the present system does not meet the requirements of DEP rules, submit the following:
  - a. Attach a description of the plant upgrade necessary to meet the DEP rules.
  - b. Have these plans been approved by DEP? \_\_\_\_\_
  - c. When will construction begin? \_\_\_\_\_
  - d. Attach plans for funding the required upgrading.
  - e. Is this system under any Consent Order with DEP? \_\_\_\_\_
- 11. Department of Environmental Protection ID # N/A
- 12. Water Management District Consumptive Use Permit # N/A
  - a. Is the system in compliance with the requirements of the CUP? \_\_\_\_\_
  - b. If not, what are the utility's plans to gain compliance? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* An ERC is determined based on one of the following methods:  
(a) If actual flow data are available from the preceding 12 months:  
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.  
  
(b) If no historical flow data are available use:  
ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

**WASTEWATER  
OPERATING  
SECTION**



**WASTEWATER UTILITY PLANT ACCOUNTS**

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
351	Organization_____	\$ 7,698	\$ _____	\$ _____	\$ 7,698
352	Franchises_____	_____	_____	_____	_____
353	Land and Land Rights_____	_____	_____	_____	_____
354	Structures and Improvements_____	8,505	_____	_____	8,505
355	Power Generation Equipment_____	_____	_____	_____	_____
360	Collection Sewers - Force_____	108,241	_____	_____	108,241
361	Collection Sewers - Gravity_____	29,068	_____	_____	29,068
362	Special Collecting Structures_____	20,773	_____	_____	20,773
363	Services to Customers_____	_____	_____	_____	_____
364	Flow Measuring Devices_____	_____	_____	_____	_____
365	Flow Measuring Installations_____	_____	_____	_____	_____
370	Receiving Wells_____	_____	_____	_____	_____
371	Pumping Equipment_____	_____	_____	_____	_____
380	Treatment and Disposal Equipment_____	_____	_____	_____	_____
381	Plant Sewers_____	_____	_____	_____	_____
382	Outfall Sewer Lines_____	_____	_____	_____	_____
389	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
390	Office Furniture and Equipment_____	_____	_____	_____	0
391	Transportation Equipment_____	_____	_____	_____	_____
392	Stores Equipment_____	_____	_____	_____	_____
393	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
394	Laboratory Equipment_____	_____	_____	_____	_____
395	Power Operated Equipment_____	_____	_____	_____	_____
396	Communication Equipment_____	_____	_____	_____	_____
397	Miscellaneous Equipment_____	_____	_____	_____	_____
398	Other Tangible Plant_____	_____	_____	_____	_____
	<b>Total Wastewater Plant_____</b>	<b>\$ 174,285</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 174,285 *</b>

\* This amount should tie to sheet F-5.

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOUNT - WASTEWATER

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	Debits (g)	Credits (h)	Accum. Depr. Balance End of Year (f-g+h=i) (i)
351	Organization_	40.0	%	2.50 %	\$ 3,264	\$	192	\$ 3,456
354	Structures and Improvements	22.0	%	4.55 %	1,163		387	1,550
355	Power Generation Equipment		%					
360	Collection Sewers - Force	27.0	%	3.70 %	86,493		4,005	90,498
361	Collection Sewers - Gravity	40.0	%	2.50 %	24,266		727	24,993
362	Special Collecting Structures	37.0	%	2.70 %	4,230		561	4,791
363	Services to Customers		%					
364	Flow Measuring Devices		%					
365	Flow Measuring Installations		%					
370	Receiving Wells		%					
371	Pumping Equipment		%					
380	Treatment and Disposal Equipment		%					
381	Plant Sewers		%					
382	Outfall Sewer Lines		%					
389	Other Plant and Miscellaneous Equipment		%					
390	Office Furniture and Equipment	6.0	%	16.67 %				
391	Transportation Equipment		%					
392	Stores Equipment		%					
393	Tools, Shop and Garage Equipment		%					
394	Laboratory Equipment		%					
395	Power Operated Equipment		%					
396	Communication Equipment		%					
397	Miscellaneous Equipment		%					
	Other - Organization		%					
	Totals				\$ 119,416	\$ -	\$ 5,871	\$ 125,287 *

\* This amount should tie to Sheet F-5.

**WASTEWATER OPERATION AND MAINTENANCE EXPENSE**

Acct. No.	Account Name	Amount
701	Salaries and Wages - Employees_____	\$ 4,339
703	Salaries and Wages - Officers, Directors, and Majority Stockholders_____	
704	Employee Pensions and Benefits_____	1,043
710	Purchased Wastewater Treatment_____	40,841
711	Sludge Removal Expense_____	
715	Purchased Power_____	1,041
716	Fuel for Power Production_____	
718	Chemicals_____	
720	Materials and Supplies_____	3,547
730	Contractual Services:	
	Billing_____	972
	Professional_____	1,512
	Other_____	
	Accounting Services_____	6,000
740	Rents_____	
750	Transportation Expense_____	
755	Insurance Expense_____	1,086
765	Regulatory Commission Expenses (Amortized Rate Case Expense)_____	
770	Bad Debt Expense_____	
775	Miscellaneous Expenses_____	1,383
	<b>Total Wastewater Operation And Maintenance Expense_____</b>	<b>\$ 61,763 *</b>

\* This amount should tie to Sheet F-3.

**WASTEWATER CUSTOMERS**

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers Start of Year (d)	Number of Active Customers End of Year (e)	Total Number of Meter Equivalents (c x e) (f)
<b>Residential Service</b>					
All meter sizes	D	1.0	189	189	189
<b>General Service</b>					
5/8"	D	1.0	1	1	1
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
2"	D,C,T	8.0			
3"	D	15.0			
3"	C	16.0			
3"	T	17.5			
Unmetered Customers	_____	_____			
Other (Specify)	_____	_____			
<b>** D = Displacement C = Compound T = Turbine</b>					
<b>Total</b>			<b>190</b>	<b>190</b>	<b>190</b>

**PUMPING EQUIPMENT**

Lift Station Number _____	_____	_____	_____	_____	_____
Make or Type and nameplate data on pump _____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Year installed _____	_____	_____	_____	_____	_____
Rated capacity _____	_____	_____	_____	_____	_____
Size _____	_____	_____	_____	_____	_____
Power:	_____	_____	_____	_____	_____
Electric _____	_____	_____	_____	_____	_____
Mechanical _____	_____	_____	_____	_____	_____
Nameplate data of motor _____	_____	_____	_____	_____	_____

**SERVICE CONNECTIONS**

Size (inches) _____	4"	_____	_____	_____	_____
Type (PVC, VCP, etc.) _____	PVC	_____	_____	_____	_____
Average length _____	15'	_____	_____	_____	_____
Number of active service connections _____	_____	_____	_____	_____	_____
Beginning of year _____	190	_____	_____	_____	_____
Added during year _____	_____	_____	_____	_____	_____
Retired during year _____	_____	_____	_____	_____	_____
End of year _____	190	_____	_____	_____	_____
Give full particulars concerning inactive connections _____	N/A	_____	_____	_____	_____

**COLLECTING AND FORCE MAINS**

	Collecting Mains			Force Mains		
Size (inches) _____	8"	8"	8"	_____	_____	_____
Type of main _____	_____	_____	_____	_____	_____	_____
Length of main (nearest foot) _____	0' - 6'	6' - 8'	8' - 10'	_____	_____	_____
Beginning of year _____	3,010	2,554	404	_____	_____	_____
Added during year _____	_____	_____	_____	_____	_____	_____
Retired during year _____	_____	_____	_____	_____	_____	_____
End of year _____	3,010	2,554	404	_____	_____	_____

**MANHOLES**

Size (inches) _____	8"	8"	8"	_____
Type of Manhole _____	_____	_____	_____	_____
Number of Manholes:	_____	_____	_____	_____
Beginning of year _____	16	7	2	_____
Added during year _____	_____	_____	_____	_____
Retired during year _____	_____	_____	_____	_____
End of Year _____	16	7	2	_____

**UTILITY NAME: CAP UTILITIES, LLC.**

<b>YEAR OF REPORT</b> December 31, 2014
--

**SYSTEM NAME:** \_\_\_\_\_

**TREATMENT PLANT      NONE**

Manufacturer _____ Type _____ "Steel" or "Concrete" _____ Total Permitted Capacity _____ Average Daily Flow _____ Method of Effluent Disposal _____ Permitted Capacity of Disposal _____ Total Gallons of Wastewater treated _____	_____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____
---	---	---	---

**MASTER LIFT STATION PUMPS      NONE**

Manufacturer _____ Capacity (GPM's) _____ Motor: Manufacturer _____ Horsepower _____ Power (Electric or Mechanical) _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
--	---	---	---	---	---	---

**PUMPING WASTEWATER STATISTICS      NONE**

Months	Gallons of Treated Wastewater	Effluent Reuse Gallons to Customers	Effluent Gallons Disposed of on site
January _____	_____	_____	_____
February _____	_____	_____	_____
March _____	_____	_____	_____
April _____	_____	_____	_____
May _____	_____	_____	_____
June _____	_____	_____	_____
July _____	_____	_____	_____
August _____	_____	_____	_____
September _____	_____	_____	_____
October _____	_____	_____	_____
November _____	_____	_____	_____
December _____	_____	_____	_____
Total for year _____	_____	_____	_____

If Wastewater Treatment is purchased, indicate the vendor: \_\_\_\_\_  
 City of Lake Worth \_\_\_\_\_

UTILITY NAME: CAP UTILITIES, LLC.

YEAR OF REPORT  
December 31, 2014

SYSTEM NAME: \_\_\_\_\_

GENERAL WASTEWATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

- |  |     |
|--|-----|
| 1. Present number of ERCs* now being served.   | 52  |
| 2. Maximum number of ERCs* which can be served.  | 52  |
| 3. Present system connection capacity (in ERCs*) using existing lines  | 52  |
| 4. Future connection capacity (in ERCs*) upon service area buildout.   | 52  |
| 5. Estimated annual increase in ERCs*.   | 0   |
| 6. Describe any plans and estimated completion dates for any enlargements or improvements to this system<br>_____<br>_____   |     |
| 7. If the utility uses reuse as a means of effluent disposal, provide a list of the reuse end users and the amount of reuse provided to each, if known.  |     |
| 8. If the utility does not engage in reuse, has a reuse feasibility study been completed? NO<br><br>If so, when? _____   |     |
| 9. Has the utility been required by the DEP or water management district to implement reuse? NO<br><br>If so, what are the utility's plans to comply with this requirement? _____  |     |
| 10. When did the company last file a capacity analysis report with the DEP?  | N/A |
| 11. If the present system does not meet the requirements of DEP rules, submit the following:<br><br>a. Attach a description of the plant upgrade necessary to meet the DEP rules.<br>b. Have these plans been approved by DEP? _____<br>c. When will construction begin? _____<br>d. Attach plans for funding the required upgrading.<br>e. Is this system under any Consent Order with DEP? _____ |     |
| 12. Department of Environmental Protection ID #  | N/A |

- \* An ERC is determined based on one of the following methods:
- (a) If actual flow data are available from the preceding 12 months:  
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.
- (b) If no historical flow data are available use:  
ERC = (Total SFR gallons sold (omit 000/365 days/280 gallons per day).

# CERTIFICATION OF ANNUAL REPORT

I HEREBY CERTIFY, to the best of my knowledge and belief:

- |  |                                |    |  |
|--|--------------------------------|----|--|
| YES<br><input checked="" type="checkbox"/> | NO<br><input type="checkbox"/> | 1. | The utility is in substantial compliance with the Uniform System of Accounts prescribed by the Florida Public Service Commission in Rule 25-30.115 (1), Florida Administrative Code.   |
| YES<br><input checked="" type="checkbox"/> | NO<br><input type="checkbox"/> | 2. | The utility is in substantial compliance with all applicable rules and orders of the Florida Public Service Commission.  |
| YES<br><input checked="" type="checkbox"/> | NO<br><input type="checkbox"/> | 3. | There have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial statement of the utility.   |
| YES<br><input checked="" type="checkbox"/> | NO<br><input type="checkbox"/> | 4. | The annual report fairly represents the financial condition and results of operations of the respondent for the period presented and other information and statements presented in the report as to the business affairs of the respondent are true, correct, and complete for the period for which it represents. |

**Items Certified**

- |   |   |   |   |
|---|---|---|---|
| 1.<br><input checked="" type="checkbox"/> | 2.<br><input checked="" type="checkbox"/> | 3.<br><input checked="" type="checkbox"/> | 4.<br><input checked="" type="checkbox"/> |
|---|---|---|---|



\_\_\_\_\_  
(signature of chief executive officer of the utility) \*

- |                                |                                |                                |                                |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|
| 1.<br><input type="checkbox"/> | 2.<br><input type="checkbox"/> | 3.<br><input type="checkbox"/> | 4.<br><input type="checkbox"/> |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|

\_\_\_\_\_  
(signature of chief financial officer of the utility) \*

\* Each of the four items must be certified YES or NO. Each item need not be certified by both officers. The items being certified by the officer should be indicated in the appropriate area to the left of the signature.

Notice: Section 837.06, Florida Statutes, provides that any person who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree.