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B. KENNETH GATLIN, P.A.  
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June 23, 1995

ORIGINAL  
FILE COPY

Ms. Blanca S. Bayo, Director  
Division of Records and Reporting  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, Florida 32399-0850

**HAND DELIVERY**

RE: Docket No. 950387-SU  
Application of FLORIDA CITIES WATER COMPANY, North  
Ft. Myers Division, for an increase in wastewater rates in Lee County,  
Florida

Dear Ms. Bayo:

Enclosed for filing in the above docket, on behalf of Florida Cities Water Company, North Ft. Myers Division, is an original and fifteen (15) copies of an Affidavit for the Notice of Application which was mailed on 6/20/95 to the customers of the North Ft. Myers Division.

Please acknowledge receipt of the foregoing by stamping the enclosed extra copy of this letter and returning same to my attention. Thank you for your assistance.

Very truly yours,



B. Kenneth Gatlin

ACK 7  
AFA 2  
APP  
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CMU Enclosures  
CTR  
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DOCUMENT NUMBER - DATE

05922 JUN 23 1995

FPSC-RECORDS/REPORTING 00284

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Application of )  
FLORIDA CITIES WATER COMPANY )  
North Ft Myers Division, )  
Wastewater Operations, for an )  
increase in Wastewater Rates )  
in Lee County, Florida )  
\_\_\_\_\_ )

Docket No. 950387-SU

A F F I D A V I T

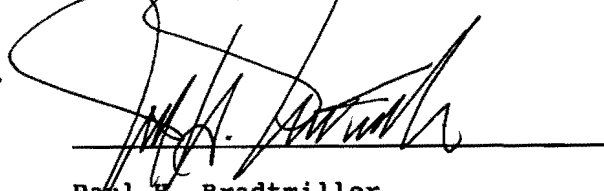
STATE OF: FLORIDA

COUNTY OF: SARASOTA

BEFORE ME, the undersigned authority, duly authorized by law to administer oaths and to take acknowledgments, on this day personally appeared Paul H. Bradtmiller, who, after being duly sworn on oath, deposes and says:

1. That the Affiant has personal knowledge of the matters set forth herein;
2. That on June 20, 1995, a copy of the Notice attached hereto was sent by regular U.S. Mail to all customers of record within the service areas of Florida Cities Water Company, North Ft. Myers Division and to all persons in the same service areas who have filed a written request for service or who have been provided a written estimate for service within the 12 calendar months prior to and in May 19, 1995, the month the petition for rate increase was filed in this proceeding.

FURTHER AFFIANT SAYETH NOT.

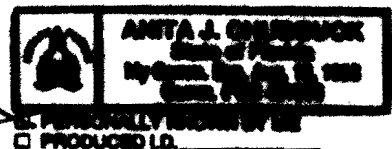


Paul H. Bradtmiller  
Executive Vice President  
Florida Cities Water Company

SWORN TO and SUBSCRIBED BEFORE me on this 21<sup>st</sup> day of June, 1995.



NOTARY PUBLIC  
State of Florida at large  
My Commission Expires:



DOCUMENT NUMBER-DATE

05922 JUN 23 1995

FPSC-RECORDS/REPORTING 00285

NOTICE

Notice is hereby given, pursuant to Rule 25-22.0407, Florida Administrative Code, that Florida Cities Water Company has applied to the Florida Public Service Commission for a rate increase for its wastewater service in Lee County, North Ft. Myers Division, Docket No. 950387-SU. Florida Cities Water Company has also applied to the Commission for approval of an increase in wastewater plant capacity charges in Lee County, North Fort Myers Division, Docket No. 950586-SU, separate from the above rate case docket.

A rate increase is necessary to allow the utility to recover the reasonable and prudent costs of providing service and an opportunity to earn a fair and reasonable rate of return.

The following is a comparison of the present and proposed rates.

WASTEWATER SERVICE

<u>Class/Meter Size</u>	<u>Present Rates</u>	<u>Proposed Final Rates</u>
<b>Residential</b>		
Base Facility charge (Monthly Min.)		
5/8 x 3/4"	\$24.37	\$32.61
3/4"	\$24.37	\$32.61
1"	\$24.37	\$32.61
1-1/2"	\$24.37	\$32.61
2"	\$24.37	\$32.61
3"	\$24.37	\$32.61
4"	\$24.37	\$32.61
6"	\$24.37	\$32.61
8"	\$24.37	\$32.61
Gallage Charge/M Gal. (6,000 Max)	\$4.62	\$5.14
<b>General Service &amp; All Other Classes</b>		
Base Facility Charge (Monthly Min.)		
5/8 x 3/4"	\$24.37	\$32.61
3/4"	-----	48.92
1"	60.94	81.53
1-1/2"	121.87	163.05
2"	194.99	260.88
3"	389.98	521.76
4"	609.35	815.25
6"	1,218.69	1,630.50
8"	-----	3,261.00
Gallage Charge/M Gal. (No Max.)	\$5.55	\$6.17

**CASE SCHEDULE**

The following dates have been established to govern the key activities of this case:

- |    |  |                  |
|----|--|------------------|
| 1. | Customer Meeting   | July 12, 1995    |
| 2. | Agenda Conference on Final Rates                                       | October 10, 1995 |
| 3. | Proposed Agency Action Order on Final Rates                            | October 30, 1995 |
| 4. | Prehearing Conference, if Proposed Agency<br>Action Order is Protested | April 22, 1996   |
| 5. | Hearing if Proposed Agency Action Order is<br>Protested                | May 28, 1996     |

This schedule is tentative and subject to change by the Commission.

A copy of the application, minimum filing requirements and synopsis are available for inspection at the Utility's offices as follows:

Florida Cities Water Company  
4837 Swift Road, Suite 100  
Sarasota, Florida 34231  
Telephone: (813) 925-3088

Florida Cities Water Company  
North Ft. Myers Division  
7401 College Parkway  
Ft. Myers, Florida 33911  
Telephone: (813) 936-0247

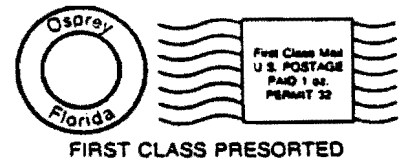
Business Hours: 8:00 a.m. - 5:00 p.m.  
Monday through Friday

Written comments concerning the utility's service or the proposed rate increase should be addressed to the Director, Division of Records and Reporting, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850, and should reference Docket No. 950387-SU. Complaints regarding service may be made to the Commission's Division of Consumer Affairs at the following toll-free number: 1-800-342-3552.

The Commission will be reviewing the utility's service availability charges in the pending rate case and may adjust those charges.

NOTICE issuance date: June 20, 1995

**FLORIDA CITIES WATER COMPANY**  
7401 College Parkway  
P.O. Box 6549  
Fort Myers, Florida 33911  
813/936-0247



00287

Willow Creek  
c/o Moody Development Corporation  
P.O. Box 2070  
Ft. Myers, FL 33902

Buttonwood Harbor  
c/o Greg Jeffcott  
Jeffcott Realty, Inc.  
2965 Grand Avenue  
Ft. Myers, FL 33901

Palm Island  
c/o Moody Development Corporation  
P.O. Box 2070  
Ft. Myers, FL 33902

Palm Island II  
c/o Moody Development Corporation  
P.O. Box 2070  
Ft. Myers, FL 33902

Ivy Park  
c/o Harry Howell  
Suite 221 Pinebrook  
12995 S. Cleveland Avenue  
Ft. Myers, FL 33907

Mariner's Key  
c/o Butler Engineering, Inc.  
1645 Colonial Blvd.  
Ft. Myers, FL 33907

RECEIVED  
JUN 21 1995  
GENERAL OFFICE

Statement of Mailing With Permit Imprints First-Class Mail

(For Priority Mail, Use Form 3605-R)

FCWC - North Ft Myers

Wastewater Rate Case

Dkt 950387-SU

PSC Notice of Application

MAILER: Complete all items by typewriter, pen, or indelible pencil. Use Form 3606 if you need a receipt.

Mailer's Information	Post Office of Mailing <i>Osprey FL</i>	Date <i>6-20-95</i>	Processing Category <input type="checkbox"/> Letters (DMM C050) <input type="checkbox"/> Flats (DMM C050) <input type="checkbox"/> Automation-Compatible Flats (DMM C820) <input type="checkbox"/> Irregular Parcels (DMM C050)	USPS Authorized Mailing ID Code(s)	
	Permit No. <i>32</i>	Federal Agency Cost Code	Mailing Statement Seq. No.		
	Permit Holder's Name & Address (Include ZIP Code) <i>Quatar 2140 Gulf Breeze Sarasota, FL 34231</i>	Telephone Number <i>921-5209</i>	Receipt No. <i>2042</i>	No. Sacks No. Trays <i>3</i>	No. Pallets No. Other
	CTAS Cust. Ref. ID	Total Pieces in Mailing <i>3607</i>	Total Weight of Mailing <i>30-4</i>	Weight of a Single Piece _____ pounds	Barcoded Flats Sacking Based On (DMM M823) <input type="checkbox"/> 125 pcs. <input type="checkbox"/> 15 lbs.
Name & Address of Individual or Organization for Which Mailing Is Prepared (If other than the permit holder)	Name and Address of Mailing Agent (If other than the permit holder)	Check All That Apply <input type="checkbox"/> Centralized Postage Payment <input type="checkbox"/> Plant loaded to <input type="checkbox"/> BMAU Entry at <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. A / O ZIP _____ <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. SCF 3D ZIP _____ <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. ADC _____			
■ For mailings of automation-compatible letter-size pieces (see DMM C810), other than cards, go to Part A on the reverse of this form. ■ For mailings of non-automation-compatible letter-size pieces (see DMM C050), other than cards, weighing .6875 lb. (11 ounces) or less, go to Part B on the reverse of this form. ■ For mailings of non-letter-size pieces (see DMM C050), other than cards, or of automation-compatible flats (see DMM C050), weighing .6875 lb. (11 ounces) or less, go to Part C on the reverse of this form. ■ For mailings of postal cards and postcards (see DMM E100), go to Part D on the reverse of this form.		Postage (From Reverse Side)	Part A \$ _____ Part B \$ _____ Part C \$ <i>726.65</i> Part D \$ _____		
<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify)		No. Pieces	Rate/Fee Per Pc. \$ _____ = \$ _____		
<b>Total Postage</b>			\$ <i>726.65</i>		
*The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and both the mailer and the agent will be liable for and agree to pay any deficiencies.)					
The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).					
I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, and that the material presented qualifies for the rates of postage claimed.					
*Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred)				Telephone Number <i>921-5209</i>	
Single-Piece Weight _____ pounds		Are the figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Total Pieces _____ Total Weight _____		If "Yes," Reason _____			
Total Postage _____					
Check One <input type="checkbox"/> Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled		Date Mailer Notified	Contact	By (Initials)	
I CERTIFY that this mailing has been inspected concerning: (1) eligibility for the rate of postage claimed; (2) proper preparation (and presort where required); (3) proper completion of the statement of mailing; and (4) payment of the required annual fee.				Round Stamp (Required)	
Signature of Weigher		Time	AM PM	00289	

Postage Computation

Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge
<b>A Automation-Compatible Letter (DMM C810)</b>			
Barcoded (5-Digit)		x _____	pcs. = \$ _____
Barcoded (3-Digit)		x _____	pcs. = \$ _____
ZIP+4 Presort		x _____	pcs. = \$ _____
Nonpresorted ZIP+4		x _____	pcs. = \$ _____
Carrier Route		x _____	pcs. = \$ _____
Presorted First-Class		x _____	pcs. = \$ _____
Single-Piece Rate		x _____	pcs. = \$ _____

Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge
<b>B Non-Automation-Compatible Letter .6875 lb. (11 oz.) or less</b>			
Carrier Route		x _____	pcs. = \$ _____
Presorted First-Class		x _____	pcs. = \$ _____
Single-Piece Rate		x _____	pcs. = \$ _____
Nonstandard Surcharge (If Applicable)			
Presort First-Class and Carrier Route	.05	x _____	pcs. = \$ _____
Single-Piece Rate	.11	x _____	pcs. = \$ _____

Total — Part A (Carry to front of form) \$ \_\_\_\_\_

Total — Part B (Carry to front of form) \$ \_\_\_\_\_

<b>C Check One:</b> <input type="checkbox"/> Automation-Compatible Flat (DMM C050) <input type="checkbox"/> Other Nonletter — .6875 lb. (11 oz.) or less			
ZIP+4 Barcoded* (3/5-Digit)		x _____	pcs. = \$ _____
ZIP+4 Barcoded* (Nonpresorted)		x _____	pcs. = \$ _____
Carrier Route		x _____	pcs. = \$ _____
Presorted First-Class		x <u>2339</u>	pcs. = \$ <u>646.89</u>
Single-Piece Rate		x <u>268</u>	pcs. = \$ <u>85.76</u>
Nonstandard Surcharge (If Applicable)			
3/5-Digit ZIP+4 Barcoded, Presorted First-Class, and Carrier Route	.05	x _____	pcs. = \$ _____
Nonpresorted ZIP+4 Barcoded and Single-Piece Rate	.11	x _____	pcs. = \$ _____

<b>D Postal Cards and Postcards</b>			
ZIP+4 Barcoded* (5-Digit)	.163	x _____	pcs. = \$ _____
ZIP+4 Barcoded* (3-Digit)	.170	x _____	pcs. = \$ _____
ZIP+4 Barcoded* (Nonpresorted)	.186	x _____	pcs. = \$ _____
ZIP+4 Presort*	.173	x _____	pcs. = \$ _____
Nonpresorted ZIP+4*	.189	x _____	pcs. = \$ _____
Carrier Route	.160	x _____	pcs. = \$ _____
Presorted First-Class	.179	x _____	pcs. = \$ _____
Single-Piece Rate	.200	x _____	pcs. = \$ _____
Nonstandard Surcharge (If Applicable)			
Presorted First-Class and Carrier Route	.05	x _____	pcs. = \$ _____
Single-Piece Rate	.11	x _____	pcs. = \$ _____

\* Available only for Automation-Compatible Flats (DMM C820)

\* Available only for Automation-Compatible Cards (DMM C820)

Part C (Carry to front of form) \$ 726.65

Total — Part D (Carry to front of form) \$ \_\_\_\_\_

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