

LAW OFFICES  
**ROSE, SUNDSTROM & BENTLEY**

A PARTNERSHIP INCLUDING PROFESSIONAL ASSOCIATIONS

2548 BLAINSTONE PINES DRIVE  
TALLAHASSEE, FLORIDA 32301

(904) 877-6555

CHRIS H. BENTLEY, PA  
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TALLAHASSEE, FLORIDA 32302-1567  
TELECOPIER (904) 856-4029

February 6, 1996

VIA HAND DELIVERY

Blanca Bayo, Director  
Division of Records & Reporting  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399

Re: Buccaneer Water Service  
Application for Staff Assisted Water Rate Increase  
Our File No. 30097.01

96 0133-44

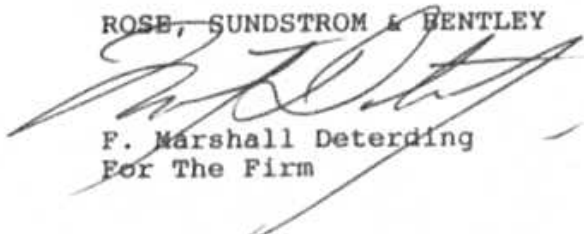
Dear Ms. Bayo:

Attached in accordance with the requirements of Section 367.0814, Florida Statutes, and Section 25-30.455, Florida Administrative Code, are the original and six copies of the application of Buccaneer Water Service for a Staff assisted water rate increase.

Should you have any questions with regard to any of the matters outlined herein, please do hesitate to contact me.

Sincerely,

ROSE, SUNDSTROM & BENTLEY

  
F. Marshall Deterding  
For The Firm

FMD/lts  
Enclosure  
cc: Ellen Kelleher, Esquire  
Marguerite Nader

RECEIVED & FILED

98  
EPSC DIVISION OF RECORDS

DOCUMENT NUMBER-DATE  
01310 FEB-6 96  
FPSC-RECORDS/REPORTING

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A  
STAFF ASSISTED RATE CASE

I. General Data

- A. Name of utility BUCCANEER WATER SERVICE
- B. Address 2210 NORTH TAMiami TRAIL  
NORTH FORT MYERS, FL 33903-2871
1. Telephone Nos. (813) 995-3337
2. County LEE Nearest city NORTH FT. MYERS
3. General area served BUCCANEER MANUFACTURED HOME COMMUNITY

C. Authority:

1. Water Certificate No. 366W Date received 05/22/95
2. Sewer Certificate No. N/A Date received N/A
3. Date utility started operations: Water 10/21/81 Sewer N/A

D. How system was acquired PURCHASED

If utility was purchased, give date 08/18/94 Amount Paid UNKNOWN (1)

1. Name of Seller DEANZA PROPERTIES-X
2. Was seller affiliated with present owners? NOT AT TIME OF SALE
3. Did you purchase: Stock \_\_\_\_\_ or assets only X

E. Type of legal entity: Corporation, Partnership or Sole

Proprietorship PARTNERSHIP

F. Ownership & Officers:

	<u>Name</u>	<u>Title</u>	<u>Percent Ownership</u>
1.	<u>MHC-DEANZA FINANCING LTD.</u>		
2.	<u>PARTNERSHIP</u>	<u>PARTNERSHIP</u>	<u>100%</u>
3.			
4.			

NOTE (1): UTILITY WAS ACQUIRED AS PART OF THE  
PURCHASE OF BUCCANEER MOBILE HOME PARK FOR A  
TOTAL PRICE OF \$16,315,226. SEE CERTIFICATE  
TRANSFER ORDER NO. PSC-95-0625-FOU-WU. NUMBER-DATE

G. List of Associate Companies and Addresses:

1. MHC OPERATING LTD. PARTNERSHIP - 99% OF MHC-DEANZA FINANCING LTD. PARTNERSHIP
2. MHC-QRS, INC. - 1% OF MHC-DEANZA FINANCING LTD. PARTNERSHIP
3. \_\_\_\_\_

H. If you have retained an attorney and/or a consultant to represent the utility for this application, furnish the name(s) and address(es):

CRONIN, JACKSON, NIXON & WILSON, CPA'S  
2560 GULF-TO-BAY BLVD, #200, CLEARWATER, FL 34625  
MARTY DETERDING, ESQ., ROSE SUNDSTROM & BENTLEY  
2548 BLAIRSTONE PINES DRIVE, TALLAHASSEE, FL 32301

II. Accounting Data

A. Outside Accountant

1. Name ROBERT C. NIXON
2. Firm CRONIN, JACKSON, NIXON & WILSON
3. Address 2560 GULF-TO-BAY BOULEVARD, SUITE 200, CLEARWATER, FL 34625
4. Telephone (813) 791-4020

B. Individual to contact on accounting matters:

1. Name ANNE BUCHER
2. Telephone (312) 466-3808

C. Location of books and records CHICAGO, IL

D. Have you filed an Annual Report with the Commission? YES

Date last filed 12/31/94

E. Has your latest semiannual regulatory assessment fee payment been made (~~September 30~~ or ~~July 31~~ whichever is applicable)? YES  
MARCH 31

F. Basic Rate Base Data (Most recent two years)

1. Water	1994	1993
Cost of Plant In Service:	\$ <u>423,085</u>	\$ <u>385,829</u>
Less Accumulated Depreciation:	<u>(146,507)</u>	<u>(120,478)</u>
Less Contributed Plant:	<u>(80,755)</u>	<u>(83,934)</u>
Net Owner's Investment:	\$ <u>195,823</u>	\$ <u>181,417</u>

2. Sewer	19__	19__
Cost of Plant In Service:	\$ <u>N/A</u>	\$ <u>N/A</u>
Less Accumulated Depreciation:	_____	_____
Less Contributed Plant:	_____	_____
Net Owner's Investment:	\$ <u>N/A</u>	\$ <u>N/A</u>

G. Basic Income Statement (Most recent two years):

1. Water	1994	1993
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	\$ <u>88,279</u>	\$ <u>86,232</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>88,279</u>	\$ <u>86,232</u>
Less Expenses:		
a. Salaries & Wages - Employees	\$ <u>19,723</u>	\$ <u>23,569</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	<u>338</u>	<u>498</u>
d. Purchased Water	<u>72,203</u>	<u>68,100</u>
e. Purchased Power	_____	_____
f. Fuel for Power Production	_____	_____
g. Chemicals	_____	_____
h. Materials & Supplies	_____	<u>471</u>
i. Contractual Services	<u>4,414</u>	<u>4,311</u>
j. Rents	_____	_____
k. Transportation Expenses	_____	_____
l. Insurance Expense	_____	_____
m. Regulatory Commission Expense	<u>1,845</u>	<u>791</u>
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	<u>5,539</u>	<u>3,198</u>
p. Depreciation Expense	<u>13,424</u>	<u>14,635</u>
q. Property Taxes	_____	_____
r. Other Taxes (RAF'S)	<u>3,973</u>	<u>3,880</u>
s. Income Taxes	_____	_____
Operating Income (Loss)	\$ <u>(33,180)</u>	\$ <u>(33,221)</u>

2. Sewer

19\_\_

19\_\_

Revenues (By Class):

a. _____	\$ <u>N/A</u>	\$ <u>N/A</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ _____	\$ _____

Less Expenses:

a. Salaries & Wages - Employees	\$ _____	\$ _____
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Sewage Treatment	_____	_____
e. Sludge Removal Expense	_____	_____
f. Purchased Power	_____	_____
g. Fuel for Power Production	_____	_____
h. Chemicals	_____	_____
i. Materials & Supplies	_____	_____
j. Contractual Services	_____	_____
k. Rents	_____	_____
l. Transportation Expenses	_____	_____
m. Insurance Expense	_____	_____
n. Regulatory Commission Expense	_____	_____
o. Bad Debt Expense	_____	_____
p. Miscellaneous Expense	_____	_____
q. Depreciation Expense	_____	_____
r. Property Taxes	_____	_____
s. Other Taxes	_____	_____
t. Income Taxes	_____	_____
Operating Income (Loss)	\$ <u>N/A</u>	\$ <u>N/A</u>

H. Outstanding Debt:

	<u>Creditor</u>	<u>Date Borrowed</u>	<u>Balance Due</u>	<u>Interest Rate</u>	<u>Expiration Date</u>
1.	<u>PACIFIC MUTUAL</u>	<u>08/18/95</u>	<u>\$32,235</u>	<u>8%</u>	<u>09/31/2001</u>
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

I. Indicate Type of Tax Return Filed:

- \_\_\_\_\_ Form 1120 - Corporation
- \_\_\_\_\_ Form 1120S - Subchapter S Corporation
- X   Form 1065 - Partnership
- \_\_\_\_\_ Form 1040 - Schedule C - Individual (Proprietorship)

III. Engineering Data

A. Outside Engineering Consultant:

1. Name NONE
2. Firm \_\_\_\_\_
3. Address \_\_\_\_\_
4. Telephone (\_\_\_\_) \_\_\_\_\_

B. Individual to contact on engineering matters:

1. Name TOM KEENAN
2. Telephone (813) 797-7674

C. Is the utility under citation by the Department of Environmental Regulation (DER) or county health department? If yes, explain. NO

D. List any known service deficiencies and steps taken to remedy problems. NONE

E. Name of plant operator(s) and DER operator certificate number(s) held. NONE

F. Is the utility serving customers outside of its certificated area? NO If yes, explain. \_\_\_\_\_

G. Wastewater: **THE UTILITY PROVIDES WATER SERVICE ONLY; THEREFORE, THIS SECTION IS NOT APPLICABLE.**

1. Gallons per day capacity of treatment facilities existing \_\_\_\_\_  
\_\_\_\_\_ under construction \_\_\_\_\_ proposed \_\_\_\_\_
2. Type and make of present treatment facilities \_\_\_\_\_
3. Approximate average daily flow of treatment plant effluent \_\_\_\_\_
4. Approximate length of sewer mains:  
Size (diameter) \_\_\_\_\_  
Linear feet \_\_\_\_\_
5. Number of manholes \_\_\_\_\_
6. Number of liftstations \_\_\_\_\_
7. How do you measure treatment plant effluent? \_\_\_\_\_
8. Is the treatment plant effluent chlorinated? \_\_\_\_\_ If yes, what is the normal dosage rate? \_\_\_\_\_

9. Tap in fees - Sewer \$ \_\_\_\_\_
10. Service availability fees - Sewer \$ \_\_\_\_\_
11. Note DER Treatment Plant Certificate Number and date of expiration: Number \_\_\_\_\_ Expiration Date \_\_\_\_\_
12. Total gallons treated during most recent twelve months \_\_\_\_\_
13. Sewage treatment purchased during most recent twelve months \_\_\_\_\_

H. Water

1. Gallons per day capacity of treatment facilities existing \_\_\_\_\_  
NONE under construction \_\_\_\_\_ proposed \_\_\_\_\_
2. Type of treatment THE UTILITY PURCHASES WATER FROM LEE COUNTY UTILITIES.
3. Approximate average daily flow of treated water 55,304 (PURCHASED)
4. Source of water supply PURCHASED - LEE COUNTY UTILITIES
5. Types of chemicals used and their normal dosage rates N/A
6. Number of wells in service NONE Total capacity in gallons per minute (gpm) N/A  
 Diameter/Depth \_\_\_\_\_ / N/A \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Motor horsepower \_\_\_\_\_  
 Pump capacity (gpm) \_\_\_\_\_
7. Reservoirs and/or hydropneumatic tanks:  
 Description NONE \_\_\_\_\_  
 Capacity \_\_\_\_\_
8. High service pumping:  
 Motor horsepower N/A \_\_\_\_\_  
 Pump capacity (gpm) \_\_\_\_\_
9. How do you measure treatment plant production? N/A
10. Approximate feet of water mains:  

Size (diameter)	2"	3"	4"	6"	_____
Linear feet	<u>17675</u>	<u>2820</u>	<u>1915</u>	<u>13565</u>	_____

11. Note any fire flow requirements and imposing government agency  
N/A
12. Number of fire hydrants in service NONE
13. Do you have a meter change out program? NO
14. Meter installation or tap in fees - Water \$55.00
15. Service availability fees - Water \$ NONE
16. Has the existing treatment facility been approved by DER?  
N/A
17. Total gallons pumped during most recent twelve months N/A
18. Total gallons sold during most recent twelve months 20,186,000
19. Gallons unaccounted for during most recent twelve months 0
20. Gallons purchased during most recent twelve months 20,186,000

IV. Rate Data

A. Individual to contact on tariff matters:

1. Name TOM KEENAN
2. Telephone Number (813) 797-7674

B. Schedule of present rates (Attach additional sheet if more space is needed): **SEE ATTACHED TARIFF SHEETS.**

1. Water:

- a. Residential Water \_\_\_\_\_
- b. General Service \_\_\_\_\_
- c. Special Contract \_\_\_\_\_
- d. Other \_\_\_\_\_

2. Sewer:

- a. Residential Sewer N/A \_\_\_\_\_
- b. General Service \_\_\_\_\_
- c. Special Contract \_\_\_\_\_
- d. Other \_\_\_\_\_



C. Number of Customers (Most recent two years):

	1994	1993
1. Water Metered		
a. Residential	<u>607</u>	<u>587</u>
b. General Service	<u>          </u>	<u>          </u>
c. Special Contract	<u>          </u>	<u>          </u>
d. Other - specify	<u>          </u>	<u>          </u>
2. Water Unmetered	19__	19__
a. Residential	<u>N/A</u>	<u>N/A</u>
b. General Service	<u>          </u>	<u>          </u>
c. Special Contract	<u>          </u>	<u>          </u>
d. Other - specify	<u>          </u>	<u>          </u>
3. Sewer	19__	19__
a. Residential	<u>N/A</u>	<u>N/A</u>
b. General Service	<u>          </u>	<u>          </u>
c. Special Contract	<u>          </u>	<u>          </u>
d. Other - specify	<u>          </u>	<u>          </u>

V Affirmation

I, ELLEN KELLEHER the undersigned owner, officer, or partner of the above named public utility, doing business in the State of Florida and subject to the control and jurisdiction of the Florida Public Service Commission, certify that the statements set forth herein are true and correct to the best of my information, knowledge and belief.

Signed Ellen Kelleher

Title SENIOR VICE PRESIDENT

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.

NAME OF COMPANY

BUCCANEER WATER SERVICE  
(MHC-De-ANZA FINANCING LIMITED PARTNERSHIP)

WATER TARIFF

GENERAL SERVICE

RATE SCHEDULE GS

- AVAILABILITY - Available throughout the area served by the Company.
- APPLICABILITY - For water service to all customers for which no other schedule applies.
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD - MONTHLY

RATE

<u>Meter Size</u>	<u>Base Facility Charge</u>
5/8" x 3/4"	\$ 3.77
Full 3/4"	5.66
1"	9.43
1 1/2"	18.88
2"	30.18
3"	60.37
4"	94.33
6"	188.68
<u>Gallonage Charge</u> per 1,000 gallons	\$ 3.96

- MINIMUM CHARGE - Base Facility Charge
- TERMS OF PAYMENT - Bills are due and payable when rendered and become delinquent if not paid within twenty (20) days. After five (5) working days written notice is mailed to the customer separate and apart from any other bill, service may then be discontinued.

EFFECTIVE DATE - August 22, 1995

Tom Keenan  
ISSUING OFFICER

TYPE OF FILING - 1995 Price Index

RegionalVicePresident  
TITLE

NAME OF COMPANY BUCCANEER WATER SERVICE  
(MHC-De-ANZA FINANCING LIMITED PARTNERSHIP)

WATER TARIFF

RESIDENTIAL SERVICE

RATE SCHEDULE RS

- AVAILABILITY - Available throughout the area served by the company.
- APPLICABILITY - For water service for all purposes in private residences and individually metered apartment units with individual meters.
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.

BILLING PERIOD - Monthly

<u>RATE</u>	<u>Meter Size</u>	<u>Base Facility Charge</u>
	5/8" x 3/4"	\$ 3.77
	Full 3/4"	5.66
	1"	9.43
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