



## REVISED APPLICATION

APPLICATION FOR NON-JURISDICTIONAL ENTITIES SECTION 367.021(12), FLORIDA STATUTES RULE 25-30.060(3)(j), FLORIDA ADMINISTRATIVE CODE

> The application must be signed by the owner or accompanied by a Letter of Authorization from the owner.

| NAME         | OF SYSTEM: Dave's Mini Mart  |
|--------------|--|
|              | PHYSICAL ADDRESS OF SYSTEM: 35255 East State Road 70   |
|              | Myakka City, Florida 34251   |
|              | COUNTY WHERE SYSTEM IS LOCATED: DESOTO   |
| NAME         | OF SYSTEM OWNER(S): David Chiaramonte  |
|              | MAILING ADDRESS (IF DIFFERENT): P.O. Box 7029  |
|              | North Port, Florida 34287  |
| HATI<br>LIMI | NAME: David Chiaramonte  ADDRESS: P.O. Box 7029  North Port, Florida 34287  MPHONE NO.: (941) 322-8500  SIRE OF OWNER'S BUSINESS ORGANIZATION (CORPORATION, PARTNERSHIP, ITED PARTNERSHIP, SOLE PROPRIETOR, ASSOCIATION, ETC.).  |
| F161         | I believe this system to be exempt from the regulation of the rida Public Service Commission pursuant to Section 367, Florida tutes, for the following reasons:  |
| nv           | 131. There is no charge for providing utility service.   |
| 1/5          | DOCUMENT NUMBER-DATE   |
| de           | U 6 6 4 8 JUN 20 8   |
| A:           | THE PROPERTY OF THE PARTY OF TH |
| NC.          | LL20_UECOURS/UELOUTING   |

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| 2.                | The costs of providing utility service are treated or recovered as operating expenses.   |
|-------------------|--|
| 3.                | The utility services provided are:   |
|                   | Water X Wastewater X or Septic X   |
|                   | For service not provided, please state who provides:   |
|                   | Not Applicable   |
| whoever intent to | aware that pursuant to Section 837.06, Florida Statutes, knowingly makes a false statement in writing with the mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second punishable as provided in s. 775.082 or s. 775.083, F.S. |
| (Dat              | e) Owner's Signature   |

(David Chiaramonte)

The original and four copies of the completed application should be mailed to:

Director, Division of Records and Reporting Plorida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, Florida 32399-0850.