

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

970633 -WS

I. General Data

A. Name of utility PARADISE LAKES UTILITIES LTD.

B. Address 2001 BRINSON ROAD , LUTZ, FL 33549

*****MAIL TO P O BOX 750, LAND O LAKES, FL 34639

1. Telephone Nos. (813) 949-9327

2. County PASCO Nearest city TAMPA

3. General area served PARADISE LAKES ONLY

C. Authority:

1. Water Certificate No. 458-W Date received 2/86

2. Sewer Certificate No. 392-S Date received 2/86

3. Date utility started operations: Water 1981 Sewer 1981

D. How system was acquired BUILT AND PURCHASED

If utility was purchased, give date 1980/1981 Amount Paid _____

1. Name of Seller ED SPICHER

2. Was seller affiliated with present owners? NO

3. Did you purchase: Stock NO or assets only YES

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

Proprietorship Limited Partnership

F. Ownership & Officers:

	<u>Name</u>	<u>Title</u>	<u>Percent Ownership</u>
1.	<u>FRED J BISCHOFF</u>	<u>MANAGING PARTNER</u>	<u>1%</u>
2.	<u>EDWARD B rood</u>	<u>LTD. PARTNER</u>	<u>1%</u>
3.	<u>PARADISE LAKES INC.</u>	<u>GENERAL PARTNER</u>	<u>98%</u>
4.	_____	_____	_____

G. List of Associated Companies and Addresses:

- 1. Paradise Lakes, Inc. same address
- 2. _____
- 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):

II. Accounting Data

A. Outside Accountant

- 1. Name WIRGES & EVANS FRANK WIRGES
- 2. Firm WIRGES & EVANS
- 3. Address 13902 DALE MABRY HIGHWAY TAMPA, FL 33618
- 4. Telephone (813) 960-8390

B. Individual to contact on accounting matters:

- 1. Name FRANK WIRGES or PAT YUCATONIS
- 2. Telephone (813) 960-8390 (813) 949-9327

C. Location of books and records 2001 Brinson Rd Lutz, fl 33549

D. Have you filed an Annual Report with the Commission? yes
Date last filed 1996

E. Has your latest semiannual regulatory assessment fee payment been made (January 30 or July 30 whichever is applicable)? yes

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

***** SEE THE NEXT PAGE FOR THE TOTAL SEWER AND WATER

1. Water	19 <u>95</u>	19 <u>96</u>
Cost of Plant In Service:	\$ _____	\$ _____
Less Accumulated Depreciation:	. _____	. _____
Less Contributed Plant:	_____	_____
Net Owner's Investment:	\$ _____	\$ _____

2. XXX TOTAL	1995	1996
Cost of Plant In Service:	\$ <u>806,208</u>	\$ <u>846,212</u>
Less Accumulated Depreciation:	(<u>252,263</u>)	(<u>287,766</u>)
Less Contributed Plant:	(<u>72,195</u>)	(<u>72,195</u>)
Net Owner's Investment:	\$ <u>481,750</u>	\$ <u>486,251</u>

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

1. Water	1995	1996
Revenues (By Class):		
a. <u>FLAT RATE</u>	\$ <u>34,417</u>	\$ <u>44,084</u>
b. <u>METERED</u>	<u>10,603</u>	<u>16,926</u>
c. <u>OTHER</u>	<u>23</u>	<u>0</u>
Total Operating Revenues:	\$ <u>45,043</u>	\$ <u>61,010</u>
Less Expenses:		
a. Salaries & Wages - Employees	\$ <u>-</u>	\$ <u>-</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	<u>-</u>	<u>-</u>
c. Employee Pensions & Benefits	<u>-</u>	<u>-</u>
d. Purchased Water	<u>-</u>	<u>-</u>
e. Purchased Power	<u>2,405</u>	<u>2,695</u>
f. Fuel for Power Production	<u>-</u>	<u>-</u>
g. Chemicals	<u>941</u>	<u>495</u>
h. Materials & Supplies	<u>48</u>	<u>563</u>
i. Contractual Services	<u>26,314</u>	<u>25,848</u>
j. Rents	<u>-</u>	<u>-</u>
k. Transportation Expenses	<u>-</u>	<u>-</u>
l. Insurance Expense	<u>2,500</u>	<u>2,083</u>
m. Regulatory Commission Expense	<u>250</u>	<u>250</u>
n. Bad Debt Expense	<u>19</u>	<u>-</u>
o. Miscellaneous Expense	<u>511</u>	<u>585</u>
p. Depreciation Expense	<u>7,235</u>	<u>7,249</u>
q. Property Taxes	<u>5</u>	<u>4</u>
r. Other Taxes	<u>2,035</u>	<u>2,766</u>
s. Income Taxes	<u>-</u>	<u>-</u>
Operating Income (Loss)	\$ <u>2,780</u>	\$ <u>18,472</u>

2. Sewer

1995

1996

Revenues (By Class):

a. <u>FLAT RATE</u>	\$ <u>73,795</u>	\$ <u>91,851</u>
b. <u>METERED</u>	<u>22,294</u>	<u>30,522</u>
c. <u>OTHER</u>	<u>23</u>	<u>0</u>
Total Operating Revenues:	\$ <u>96,112</u>	\$ <u>122,373</u>

Less Expenses:

a. Salaries & Wages - Employees	\$ <u>-</u>	\$ <u>-</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	<u>-</u>	<u>-</u>
c. Employee Pensions & Benefits	<u>-</u>	<u>-</u>
d. Purchased Sewage Treatment	<u>-</u>	<u>-</u>
e. Sludge Removal Expense	<u>3,490</u>	<u>4,130</u>
f. Purchased Power	<u>7,131</u>	<u>6,391</u>
g. Fuel for Power Production	<u>-</u>	<u>-</u>
h. Chemicals	<u>13,376</u>	<u>13,455</u>
i. Materials & Supplies	<u>1,262</u>	<u>78</u>
j. Contractual Services	<u>41,878</u>	<u>37,959</u>
k. Rents	<u>-</u>	<u>-</u>
l. Transportation Expenses	<u>-</u>	<u>-</u>
m. Insurance Expense	<u>2,500</u>	<u>2,083</u>
n. Regulatory Commission Expense	<u>250</u>	<u>250</u>
o. Bad Debt Expense	<u>40</u>	<u>-</u>
p. Miscellaneous Expense	<u>511</u>	<u>589</u>
q. Depreciation Expense	<u>21,652</u>	<u>26,190</u>
r. Property Taxes	<u>1,145</u>	<u>577</u>
s. Other Taxes	<u>4,333</u>	<u>5,528</u>
t. Income Taxes	<u>0</u>	<u>0</u>
Operating Income (Loss)	\$ <u>(1,456)</u>	\$ <u>24,543</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>SOUTH TRUST BANK</u>	<u>6/12/93</u>	<u>27,002.03</u>	<u>9.25</u>	<u>6/12/98</u>
2.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
3.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
4.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

I. Indicate Type of Tax Return Filed:

<u> </u>	Form 1120 - Corporation
<u> </u>	Form 1120S - Subchapter S Corporation
<u> X </u>	Form 1065 - Partnership
<u> </u>	Form 1040 - Schedule C - Individual (Proprietorship)

III. Engineering Data

A. Outside Engineering Consultant:

1. Name ROB WALLACE
2. Firm ENVIRONMENTAL ENGEERING
3. Address 5119 N FLORIDA AVE, PO BOX 7854, TAMPA, FL 33673
4. Telephone (813) 237-3781

B. Individual to contact on engineering matters:

1. Name ROB WALLACE
2. Telephone (813) 237-3781

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. BILL LAMB
ON CONTRACT W152 S480

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

G. Wastewater:

1. Gallons per day capacity of treatment facilities existing 71,000 under construction _____ proposed _____
2. Type and make of present treatment facilities GPD EXTENDED AIR PLANT, DAVCO MFG.
3. Approximate average daily flow of treatment plant effluent GPD 45,000
4. Approximate length of sewer mains:
Size (diameter) 8" 6" 2" _____
Linear feet 4884 1432 473 _____
5. Number of manholes 25
6. Number of liftstations 2
7. How do you measure treatment plant effluent? METERED
8. Is the treatment plant effluent chlorinated? YES If yes, what is the normal dosage rate? 3PARTS PER M

9. Tap in fees - Sewer \$ 0
10. Service availability fees - Sewer \$ 0
11. Note DER Treatment Plant Certificate Number and date of expiration: Number 392S Expiration Date EXTENSION IN EFFECT.
12. Total gallons treated during most recent twelve months 22,576,000
13. Sewage treatment purchased during most recent twelve months NONE

H. Water

1. Gallons per day capacity of treatment facilities existing 100,000 under construction _____ proposed _____
2. Type of treatment GAS CHLORINE INJECTION
3. Approximate average daily flow of treated water 70,000
4. Source of water supply 2 DEEP WELLS
5. Types of chemicals used and their normal dosage rates GAS CHLORINATED 1.4 LBS PER DAY
6. Number of wells in service 2 Total capacity in gallons per minute (gpm) 320
- Diameter/Depth 6" / 350' 4" / 65' _____/_____
- Motor horsepower 20 _____
- Pump capacity (gpm) 250G 70G _____
7. Reservoirs and/or hydropneumatic tanks:
- Description ABOVE GROUND PNEUMATIC STEAL
- Capacity 10,000G
8. High service pumping:
- Motor horsepower 20
- Pump capacity (gpm) 300RATED
9. How do you measure treatment plant production? METERED
10. Approximate feet of water mains:
- | Size (diameter) | 2" | 3" | 4" | 6" | 8" |
|-----------------|------------|------------|-------------|-------------|------------|
| Linear feet | <u>117</u> | <u>638</u> | <u>1426</u> | <u>2242</u> | <u>822</u> |

11. Note any fire flow requirements and imposing government agency
N/A
12. Number of fire hydrants in service N/A
13. Do you have a meter change out program? NO
14. Meter installation or tap in fees - Water \$ 0
15. Service availability fees - Water \$ 0
16. Has the existing treatment facility been approved by DER?
YES
17. Total gallons pumped during most recent twelve months 23,745,000
18. Total gallons sold during most recent twelve months N/A
19. Gallons unaccounted for during most recent twelve months 0
20. Gallons purchased during most recent twelve months 0

IV. Rate Data

A. Individual to contact on tariff matters:

1. Name _____
2. Telephone Number _____

B. Schedule of present rates (Attach additional sheet if more space is needed):

1. Water:

a. Residential Water	<u>5.68</u>
b. General Service	<u>1.67</u>
c. Special Contract	<u>14.19, 90.82</u>
d. Other	<u> </u>

2. Sewer:

a. Residential Sewer	<u>8.35</u>
b. General Service	<u>4.62</u>
c. Special Contract	<u>20.88, 133.62</u>
d. Other	<u> </u>

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

	19_95	19_96
1. Water Metered		
a. Residential	59	59
b. General Service		
c. Special Contract		
d. Other - specify		
2. Water Unmetered		
a. Residential	281	281
b. General Service		
c. Special Contract	2	2
d. Other - specify		
3. Sewer		
a. Residential	281	281
b. General Service	2	2
c. Special Contract		
d. Other - specify		

V Affirmation

I, FRED J. BISCHOFF 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 for Fred J Bischoff in his absence by Patricia A. Yucatonis Adm. Mgr P.L.I.

Signed _____
Title PRESIDENT, LIMITED PARTNER

Patricia A. Yucatonis

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.

5/20/97 *Jo Ann Elf Pessagno*

