

GATLIN, SCHIEFELBEIN & COWDERY, P.A.
Attorneys at Law

3301 Thomasville Road, Suite 300
Tallahassee, Florida 32312

B. KENNETH GATLIN
WAYNE L. SCHIEFELBEIN
KATHRYN G.W. COWDERY

OF COUNSEL
THOMAS F. WOODS

RECEIVED-FPSC
TELEPHONE (850) 385-9996
TELECOPIER (850) 385-6755
E-MAIL: bkgatlin@nettally.com

98 JUL -1 PM 2:47

July 1, 1998

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

HAND DELIVERY

RE: Docket No. 971663-WS
Petition of Florida Cities Water Company for limited
proceeding to recover environmental litigation costs for North
and South Ft. Myers Division in Lee County and Barefoot Bay
Divisions in Brevard County.

Dear Ms. Bayo:

Enclosed on behalf of Florida Cities Water Company, for filing
in the above docket, are an original and fifteen (15) copies of an
Affidavit of Notice of Service Hearings.

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

Thank you.

Very truly yours,

B. Kenneth Gatlin
B. Kenneth Gatlin

RECEIVED & FILED
FPSC-BUREAU OF RECORDS

BKG/l dv
Enclosures

cc: Harold McLean, Esq.
Rosanne Gervasi, Esq.

DOCUMENT NUMBER-DATE

06915 JUL-18

FLORIDA PUBLIC SERVICE COMMISSION

- ICK
- IFA 1
- APP
- AF
- MU
- TR
- AG
- EG 1 BKG/l dv
- IN 5
- PC cc: Harold McLean, Esq.
- CH cc: Rosanne Gervasi, Esq.
- EC 1
- NAS Wallas
- OTH

ORIGINAL

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Petition of)
FLORIDA CITIES WATER COMPANY)
Barefoot Bay and Ft. Myers Divisions,)
for Limited Proceeding to Recover)
Environmental Litigation Costs)
for North and South Ft. Myers Divisions)
in Lee County and Barefoot Bay)
Division in Brevard County, Florida)

Docket No. 971663-WS

AFFIDAVIT

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 Michael E. Murphy, 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 in June 22, 1998, 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, Barefoot Bay Division
3. That in June 24, 1998, 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 & South Ft. Myers Divisions

FURTHER AFFIANT SAYETH NOT.

Michael E. Murphy

Michael E. Murphy
Vice President & Chief Financial Officer
Florida Cities Water Company

SWORN TO and SUBSCRIBED BEFORE me on this 25th day of June, 1998.

 ANITA J. CHUBBUCK
State of Florida
My Comm. Exp. Aug. 18, 1998
Comm. # CC 401596

PERSONALLY KNOWN BY ME
 PRODUCED I.D. _____

Anita J. Chubbuck
NOTARY PUBLIC
State of Florida at large

June 18, 1998

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Petition of FLORIDA)
CITIES WATER COMPANY, seeking)
recovery of environmental)
litigation costs in a Limited)
Proceeding for its NORTH and)
SOUTH FT. MYERS DIVISIONS in)
Lee County and BAREFOOT BAY)
DIVISION in Brevard County,)
Florida)

Docket No. 971663-WS

FLORIDA CITIES WATER COMPANY
BAREFOOT BAY DIVISION
NOTICE OF CUSTOMER SERVICE HEARING

NOTICE IS HEREBY GIVEN that the Florida Public Service Commission will hold a customer service hearing regarding the petition of Florida Cities Water Company, Barefoot Bay Division (Petitioner), seeking approval of increased rates for water and wastewater service for reasons set forth in the April, 1998 notice to you at the following time, date, and location:

1:00 p.m., Tuesday, July 14, 1998
Barefoot Bay Community Center
Building A
625 Barefoot Boulevard
Barefoot Bay, Florida

All customers wishing to testify are urged to be present at the beginning of the hearing, since the hearing may be adjourned early if no customers are present.

PURPOSE

The purpose of the service hearing is for the Petitioner's customers to provide sworn relevant testimony concerning the Petitioner's requested rate increase. A further hearing will be

held by the Commission in Tallahassee on August 12, 1998 for the purpose of receiving relevant technical testimony and exhibits. A subsequent notice for the hearing in Tallahassee will be furnished to customers and all parties.

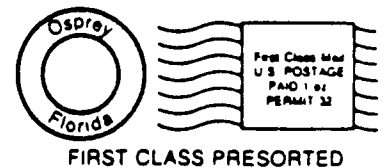
Any persons requiring some accommodation at this hearing, because of a physical impairment should call the Division of Records and Reporting at (850) 413-6770 at least five calendar days prior to the hearing. Any person who is hearing or speech impaired, please contact the Florida Public Service Commission using the Florida Relay Service, which can be reached at 1-800-955-8771 (TDD).

JURISDICTION

The Florida Public Service Commission is vested with jurisdiction over this matter by virtue of Chapter 367, Florida Statutes. The service hearing will be held in accordance with such Chapter and with Chapters 9, 22, and 30, Florida Administrative Code.

This Notice was prepared by Florida Cities Water Company and approved by the Staff of the Florida Public Service Commission.

FLORIDA CITIES WATER COMPANY
931 Barefoot Blvd., Suite 2
Barefoot Bay, Florida 32976
Telephone 561/664-5916



Statement of Mailing With Permit Imprints First-Class Mail
 (For Priority Mail, Use Form 3605-R)

FCWC Surcharge Case Dkt 971663-W5
 Barefoot Bay Service Hearing Notice
 mailed 6/22/98 (PSC)

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>6/22/98</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) <i>2-2 flyers</i>			
	Permit No. <i>32</i>	Federal Agency Cost Code	Mailing Statement Seq. No.					
	Permit Holder's Name & Address (Include ZIP Code) <i>Avatar 2140 Sulzbate Davenport IA 52001</i>	Telephone Number <i>921-5209</i>	Receipt No. <i>4447</i>	No. Sacks		No. Trays <i>4</i>	No. Pallets	No. Other
	CTAS Cust. Ref. ID	Total Pieces in Mailing <i>4360</i>		Total Weight of Mailing		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 _____		

Postage Computation	<input checked="" type="checkbox"/> For mailings of automation-compatible letter-size pieces (see DMM C810), other than cards, go to Part A on the reverse of this form.		Postage (From Reverse Side)	Part A	\$
	<input checked="" type="checkbox"/> 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.			Part B	\$
	<input checked="" type="checkbox"/> 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.			Part C	\$ <i>1261.91</i>
	<input checked="" type="checkbox"/> For mailings of postal cards and postcards (see DMM E100), go to Part D on the reverse of this form.			Part D	\$
	<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify)			No. Pieces	Rate/Fee Per Pc. \$ = \$
Total Postage					\$ <i>1261.91</i>

Certification

*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 3602).

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) *C. Holman* *Carl* *8825.10* Telephone Number *921-5209*

USPS Use Only	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	<i>98</i>	

Form 3600-R — First-Class Other Than Priority Mail — Permit Imprint

Postage Computation

Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge	Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge
A Automation-Compatible Letter (DMM C810)				B Non-Automation-Compatible Letter .6875 lb. (11 oz.) or less			
Barcoded (5-Digit)		x	pcs. = \$	Carrier Route		x	pcs. = \$
Barcoded (3-Digit)		x	pcs. = \$	Presorted First-Class		x	pcs. = \$
ZIP+4 Presort		x	pcs. = \$	Single-Piece Rate		x	pcs. = \$
Nonpresorted ZIP+4		x	pcs. = \$	Nonstandard Surcharge (If Applicable)			
Carrier Route		x	pcs. = \$	Presort First-Class and Carrier Route	.05	x	pcs. = \$
Presorted First-Class		x	pcs. = \$	Single-Piece Rate	.11	x	pcs. = \$
Single-Piece Rate		x	pcs. = \$				

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

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

C Check One: Automation-Compatible Flat (DMM C050)
 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	1279	x	3251 pcs. = \$ 907.03
Single-Piece Rate	32	x	1109 pcs. = \$ 354.88
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. = \$

D Postal Cards and Postcards

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)

99

Total — Part C (Carry to front of form)

\$ 1261.91

Total — Part D (Carry to front of form)

\$ _____

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Petition of FLORIDA)
CITIES WATER COMPANY, seeking)
recovery of environmental)
litigation costs in a Limited)
Proceeding for its NORTH and)
SOUTH FT. MYERS DIVISIONS in)
Lee County and BAREFOOT BAY)
DIVISION in Brevard County,)
Florida)

Docket No. 971663-WS

June 19, 1998

FLORIDA CITIES WATER COMPANY
NORTH AND SOUTH FT. MYERS DIVISIONS
NOTICE OF CUSTOMER SERVICE HEARING

NOTICE IS HEREBY GIVEN that the Florida Public Service Commission will hold a customer service hearing regarding the petition of Florida Cities Water Company, North and South Ft. Myers Divisions (Petitioner), seeking approval of increased rates for water and wastewater service for reasons set forth in the April, 1998 notice to you at the following times, date, and location:

1:30 and 6:30 p.m., Wednesday, July 15, 1998
Amtel Mariner Hotel & Suite
(Formerly the Sheraton Harbor Place)
Aqua Dome
2500 Edward Drive
Ft. Myers, Florida

PURPOSE

The purpose of the service hearing is for the Petitioner's customers to provide sworn relevant testimony concerning the Petitioner's requested rate increase. A further hearing will be held by the Commission in Tallahassee on August 12, 1998 for the purpose of receiving relevant technical testimony and exhibits. A subsequent notice for the hearing in Tallahassee will be furnished

to customers and all parties.

Any persons requiring some accommodation at this hearing, because of a physical impairment should call the Division of Records and Reporting at (850) 413-6770 at least five calendar days prior to the hearing. Any person who is hearing or speech impaired, please contact the Florida Public Service Commission using the Florida Relay Service, which can be reached at 1-800-955-8771 (TDD).

JURISDICTION

The Florida Public Service Commission is vested with jurisdiction over this matter by virtue of Chapter 367, Florida Statutes. The service hearing will be held in accordance with such Chapter and with Chapters 9, 22, and 30, Florida Administrative Code.

This Notice was prepared by Florida Cities Water Company and approved by the Staff of the Florida Public Service Commission.

FLORIDA CITIES WATER COMPANY
7401 College Parkway
Fort Myers, Florida 33907
Telephone 941/936-0247



Statement of Mailing With Permit Imprints First-Class Mail

(For Priority Mail, Use Form 3605-R)

FCWC Surcharge Case Dkt 971663-ws
N + S Ft Myers Service Hearing Notice
mailed 6/24/98 (PSC)

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>6/24/98</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.	Federal Agency Cost Code	Mailing Statement Seq. No.		
	Permit Holder's Name & Address (Include ZIP Code) <i>Quincy 2140 Duffont Paravoth FL 34231</i>	Telephone Number <i>921-5209</i>	Receipt No. <i>4453</i>	No. Sacks No. Trays No. Pallets No. Other	
	CTAS Cust. Ref. ID	Weight of a Single Piece _____ pounds		Total Pieces in Mailing <i>17764</i>	Total Weight of Mailing
	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)		Barcoded Flats Sacking Based On (DMM M823) <input type="checkbox"/> 125 pcs <input type="checkbox"/> 15 lbs

Postage Computation	<input checked="" type="checkbox"/> For mailings of automation-compatible letter-size pieces (see DMM C810), other than cards, go to Part A on the reverse of this form. <input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> 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	\$ <i>285.60</i>
			Part B	\$
			Part C	\$ <i>4758.17</i>
			Part D	\$
	<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify)	No. Pieces	Rate/Fee Per Pc. = \$	
Total Postage			\$ <i>5043.77</i>	

Certification

*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) *C. Holmes* Telephone Number *921-5209*

USPS Use Only	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
	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.		By (Initials)

Signature of Weigher _____ Time **AM** **102**

PM

Form 3600-R — First-Class Other Than Priority Mail — Permit Imprint

Postage Computation

Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge	Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge
A Automation-Compatible Letter (DMM C810)				B Non-Automation-Compatible Letter .6875 lb. (11 oz.) or less			
Barcoded (5-Digit)		x	pcs. = \$	Carrier Route		x	pcs. = \$
Barcoded (3-Digit)		x	pcs. = \$	Presorted First-Class		x	pcs. = \$
ZIP+4 Presort		x	pcs. = \$	Single-Piece Rate		x	pcs. = \$
Nonpresorted ZIP+4		x	pcs. = \$	Nonstandard Surcharge (If Applicable)			
Carrier Route		x	pcs. = \$	Presort First-Class and Carrier Route	.05	x	pcs. = \$
Presorted First-Class	<u>.238</u>	x <u>1200</u>	pcs. = \$ <u>285.60</u>	Single-Piece Rate	.11	x	pcs. = \$
Single-Piece Rate		x	pcs. = \$				
Total — Part A (Carry to front of form) \$ <u>285.60</u>				Total —			
C Check One: <input type="checkbox"/> Automation-Compatible Flat (DMM C050) <input type="checkbox"/> Other Nonletter — .6875 lb. (11 oz.) or less				D Pc			
ZIP+4 Barcoded* (3/5-Digit)		x	pcs. = \$	ZIP+4 E (5-Digit)			
ZIP+4 Barcoded* (Nonpresorted)		x	pcs. = \$	ZIP+4 F (3-Digit)			
Carrier Route		x	pcs. = \$	ZIP+4 G (Non)			
Presorted First-Class	<u>.279</u>	x <u>13227</u>	pcs. = \$ <u>3690.33</u>	ZIP+4 H			
Single-Piece Rate	<u>.32</u>	x <u>3337</u>	pcs. = \$ <u>1067.84</u>	Nonpre			
Nonstandard Surcharge (If Applicable)				Carrier			
3/5-Digit ZIP+4 Barcoded, Presorted First-Class, and Carrier Route	.05	x	pcs. = \$	Presor			
Nonpresorted ZIP+4 Barcoded and Single-Piece Rate	.11	x	pcs. = \$	Single-			
				Nonsta (If A Pre: and			
				Single-Piece Rate	.11	x	pcs. = \$

81.42
 24.60
 3.22
 1.80
 17.02
 1.20
 1-8 Canada 177@ .46
 1-9 foreign 41@ .60
 1-1 Canada 7@ .46
 1-1 foreign 3@ .60
 2-2 Canada 37@ .46
 2-2 foreign 2@ .60

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

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

4/20/10