

99-937-SU

14 July 1999

Director, Division of Records and Reporting  
FLORIDA PUBLIC SERVICE COMMISSION  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

DEPOSIT  
D170

DATE  
JUL 19 1999

RECEIVED  
FLORIDA PUBLIC  
SERVICE COMMISSION  
MAIL ROOM  
99 JUL 19 AM 9:13

Subject: Submittal of Staff Assisted Rate Case Application for ABCA, Inc.  
Village Lakeland Wastewater Utility in Polk County

Project: Request for a Rate Increase from the Public Service Commission  
(PSC) for the Village Lakeland Wastewater Utility

EVI Job No.: 99006000

Dear Sir or Madam:

On behalf of ABCA, Inc., the owner and operator of the Village Lakeland Wastewater Utility, we are pleased to submit one original and two copies of this application for a Staff Assisted Rate Case (SARC). Also enclosed is Check No. 1224 in the amount of \$1,000.00 for the required application fee.

Please contact Mr. Paul Lowry, Utility Manager, Post Office Box 2303, Eaton Park, Florida 33840, (941) 667-4778, to arrange for a preliminary review of the Utility's records to confirm its eligibility for the SARC. (Please note that Mr. Lowry will be on vacation until 3 August 1999.)

Any questions you may have related to the financial information contained herein can be forwarded to the Utility's CPA, Jerry Cadden, at (813) 933-3943. Questions related to the wastewater system information contained herein can be handled by the Utility's engineer, Steven C. Shealey, P.E., at our office, phone number (941) 324-1112.

Please call us if you have any questions. We sincerely appreciate your cooperation and assistance with this important Project.

Yours truly,  
ENVISORS, INC.



Beth L. Higgins, AICP  
Project Manager

BLH/bbb  
Encl.:  
Copy to:

As stated  
Pamela McCarthy, Assistant Vice President, First Union National Bank; Jerry Cadden, CPA; Paul Lowry, Utility Manager; EVI Files No. 99006000; F:\Corres\Misc\1999\99006000.L02

DOCUMENT NUMBER - DATE  
08546 JUL 19 99

FPSC-RECORDS/REPORTING

A.B.C.A., INC. DBA  
VILLAGE LAKELAND WATER & SEWAGE FRANCHISE  
P.O. BOX 2303  
EATON PARK, FL 33840

1224

63-751/831  
00711

July 17 1999

PAY TO THE  
ORDER OF

Public Service Commission

100.00

One Thousand & 00/100

DOLLARS

FIRST  
UNION

First Union National Bank  
of Florida  
Auburndale, Florida  
24 Hour Information Service  
1-800-735-1012

FOR

Application Fee

James E Lowry

REDACTED

APPLICATION FOR A  
STAFF ASSISTED RATE CASE

I. General Data

A. Name of utility The Village Lakeland Wastewater System d/b/a ABCA, INC.

B. Address 1970 Chain Bridge Road, 7th Floor, South Tower  
McLean, Virginia 22102

1. Telephone Nos. (703) 760-5904

2. County Polk Nearest city Lakeland

3. General area served The Village Lakeland Mobile Home subdivision

C. Authority:

1. Water Certificate No. N/A Date received \_\_\_\_\_

2. Sewer Certificate No. 515-S Date received 1 June 1998

3. Date utility started operations: Water N/A Sewer 1972

D. How system was acquired Foreclosure

If utility was purchased, give date \_\_\_\_\_ Amount Paid \_\_\_\_\_

1. Name of Seller \_\_\_\_\_

2. Was seller affiliated with present owners? \_\_\_\_\_

3. Did you purchase: Stock \_\_\_\_\_ or assets only \_\_\_\_\_

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

F. Ownership & Officers:

<u>Name</u>	<u>Title</u>	<u>Percent Ownership</u>
<u>ABCA, Inc.</u>		<u>100%</u>
<u>c/o First Union National Bank</u>		
<u>Pamela C. McCarthy</u>	<u>Asst. VP</u>	
<u>1970 Chain Bridge Road, 7th Floor, South Tower</u> <u>McLean, VA 22102</u>		

PSC/WAS 2 (Rev. 11/86)

G. List of Associated Companies and Addresses:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

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):

DOCUMENT NUMBER-DATE  
**08546 JUL 19 88**  
FPSC-RECORDS/REPORTING

II. Accounting Data

A. Outside Accountant

1. Name Jerome Cadden, CPA
2. Firm Valiente, Hernandez & Co., P.A
3. Address 918 E. Busch Blvd., Tampa, Florida 33612
4. Telephone (813) 933-3943

B. Individual to contact on accounting matters:

1. Name Jerome Cadden, CPA
2. Telephone (813) 933-3943

C. Location of books and records Paul Lowry, Utility Manager, (941)667-47  
P.O. Box 2303, Eaton Park, Florida 33840

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

Date last filed 1998

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)

1. Water	N/A	19__	19__
Cost of Plant In Service:		\$ _____	\$ _____
Less Accumulated Depreciation:		_____	_____
Less Contributed Plant:		_____	_____
Net Owner's Investment:		\$ _____	\$ _____

2. Sewer	1998	1997
Cost of Plant In Service:	\$ <u>500,000</u>	\$ <u>500,000</u>
Less Accumulated Depreciation:	<u>10,770</u>	<u>7,180</u>
Less Contributed Plant:	<u>          </u>	<u>          </u>
Net Owner's Investment:	\$ <u><u>489,230</u></u>	\$ <u><u>492,820</u></u>

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

1. Water    N/A	19__	19__
Revenues (By Class):		
a. _____	\$ _____	\$ _____
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ _____	\$ _____
Less Expenses:		
a. Salaries & Wages - Employees	\$ _____	\$ _____
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Water	_____	_____
e. Purchased Power	_____	_____
f. Fuel for Power Production	_____	_____
g. Chemicals	_____	_____
h. Materials & Supplies	_____	_____
i. Contractual Services	_____	_____
j. Rents	_____	_____
k. Transportation Expenses	_____	_____
l. Insurance Expense	_____	_____
m. Regulatory Commission Expense	_____	_____
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	_____	_____
p. Depreciation Expense	_____	_____
q. Property Taxes	_____	_____
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	\$ <u>          </u>	\$ <u>          </u>

2. Sewer

19\_98

19\_97

Revenues (By Class):

a. <u>Residential</u>	\$ <u>47,984</u>	\$ <u>34,454</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>47,984</u>	\$ <u>34,454</u>

Less Expenses:

a. Salaries & Wages - Employees	\$ <u>7200</u>	\$ <u>7200</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Sewage Treatment	_____	_____
e. Sludge Removal Expense	<u>350</u>	<u>2000</u>
f. Purchased Power	<u>15375</u>	<u>15864</u>
g. Fuel for Power Production	_____	_____
h. Chemicals	<u>780</u>	<u>1114</u>
i. Materials & Supplies	<u>86</u>	<u>3154</u>
j. Contractual Services	<u>6588</u>	<u>10064</u>
k. Rents	_____	_____
l. Transportation Expenses	_____	_____
m. Insurance Expense	_____	_____
n. Regulatory Commission Expense	_____	_____
o. Bad Debt Expense	_____	_____
p. Miscellaneous Expense	<u>9273</u>	<u>4885</u>
q. Depreciation Expense	<u>3590</u>	<u>3590</u>
r. Property Taxes	_____	_____
s. Other Taxes	_____	_____
t. Income Taxes	<u>4742</u>	<u>(11,032)</u>
Operating Income (Loss)	\$ _____	\$ _____

H. Outstanding Debt: N/A

	<u>Creditor</u>	<u>Date Borrowed</u>	<u>Balance Due</u>	<u>Interest Rate</u>	<u>Expiration Date</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

I. Indicate Type of Tax Return Filed:

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

III. Engineering Data

A. Outside Engineering Consultant:

1. Name Beth L. Higgins, AICP, Vice President
2. Firm Envisors, Inc.
3. Address P.O. Box 9309, Winter Haven, FL 33883
4. Telephone (941) 324-1112

B. Individual to contact on engineering matters:

1. Name Beth L. Higgins, AICP
2. Telephone (941) 324-1112

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. Inflow and infiltration remedied by replacing broken seal on older manholes.

E. Name of plant operator(s) and DER operator certificate number(s) held. Gaines Alexander, A5025

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 70,000 gpd  
N/A under construction N/A proposed \_\_\_\_\_
2. Type and make of present treatment facilities Type III Contact Stabilization Domestic WWTP (Concrete)-- Defiance Co.
3. Approximate average daily flow of treatment plant effluent \_\_\_\_\_  
30,844 gpd
4. Approximate length of sewer mains:  
Size (diameter) 4-in. 6-in. 8-in. \_\_\_\_\_  
Linear feet 1,740 815 14,456 \_\_\_\_\_
5. Number of manholes 53
6. Number of liftstations 6
7. How do you measure treatment plant effluent? Turbine Flow Meter
8. Is the treatment plant effluent chlorinated? Yes If yes, what is the normal dosage rate? 10 lbs. / MG

9. Tap in fees - Sewer \$ 15.00
10. Service availability fees - Sewer \$ 880.00
11. Note DER Treatment Plant Certificate Number and date of expiration: Number D053-254659 Expiration Date 29 September 1999
12. Total gallons treated during most recent twelve months 11.258 MG  
(May 1998 - April 1999)
13. Sewage treatment purchased during most recent twelve months N/A

H. Water N/A

1. Gallons per day capacity of treatment facilities existing \_\_\_\_\_  
\_\_\_\_\_ under construction \_\_\_\_\_ proposed \_\_\_\_\_
2. Type of treatment \_\_\_\_\_  
\_\_\_\_\_
3. Approximate average daily flow of treated water \_\_\_\_\_
4. Source of water supply \_\_\_\_\_
5. Types of chemicals used and their normal dosage rates \_\_\_\_\_  
\_\_\_\_\_
6. Number of wells in service \_\_\_\_\_ Total capacity in gallons per  
minute (gpm) \_\_\_\_\_  
  
Diameter/Depth \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Motor horsepower \_\_\_\_\_  
Pump capacity (gpm) \_\_\_\_\_
7. Reservoirs and/or hydropneumatic tanks:  
  
Description \_\_\_\_\_  
Capacity \_\_\_\_\_
8. High service pumping:  
  
Motor horsepower \_\_\_\_\_  
Pump capacity (gpm) \_\_\_\_\_
9. How do you measure treatment plant production? \_\_\_\_\_
10. Approximate feet of water mains:  
  
Size (diameter) \_\_\_\_\_  
Linear feet \_\_\_\_\_



11. Note any fire flow requirements and imposing government agency \_\_\_\_\_
12. Number of fire hydrants in service \_\_\_\_\_
13. Do you have a meter change out program? \_\_\_\_\_
14. Meter installation or tap in fees - Water \$ \_\_\_\_\_
15. Service availability fees - Water \$ \_\_\_\_\_
16. Has the existing treatment facility been approved by DER?  
\_\_\_\_\_
17. Total gallons pumped during most recent twelve months \_\_\_\_\_
18. Total gallons sold during most recent twelve months \_\_\_\_\_
19. Gallons unaccounted for during most recent twelve months \_\_\_\_\_
20. Gallons purchased during most recent twelve months \_\_\_\_\_

IV. Rate Data

A. Individual to contact on tariff matters:

1. Name Beth L. Higgins, AICP
2. Telephone Number (941)324-1112

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

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

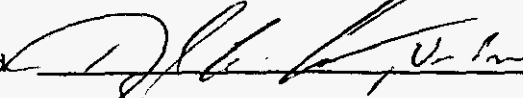
2. Sewer:
  - a. Residential Sewer \$10.25/month flat rate
  - b. General Service \_\_\_\_\_
  - c. Special Contract \_\_\_\_\_
  - d. Other \_\_\_\_\_

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

1. Water Metered	N/A	19__	19__
a. Residential		_____	_____
b. General Service		_____	_____
c. Special Contract		_____	_____
d. Other - specify		_____	_____
2. Water Unmetered	N/A	19__	19__
a. Residential		_____	_____
b. General Service		_____	_____
c. Special Contract		_____	_____
d. Other - specify		_____	_____
3. Sewer		19_97	19_98
a. Residential		244	256
b. General Service		_____	_____
c. Special Contract		_____	_____
d. Other - specify		_____	_____

V Affirmation

I, ~~Pamela McCarthy~~ <sup>DOUGLAS A. CARSON</sup> \_\_\_\_\_ 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   
 Title DOUGLAS A. CARSON  
 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.