

ORIGINAL
RUTLEDGE, ECENIA, PURNELL & HOFFMAN

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GOVERNMENTAL CONSULTANTS
JONATHAN M. COSTELLO
MARGARET A. MENDUNI

May 7, 2007

Ms. Ann Cole, Director
Commission Clerk and Administrative Services
Florida Public Service Commission
2540 Shumard Oak Boulevard
Betty Easley Conference Center
Room 110
Tallahassee, FL 32399-0850

HAND DELIVERY

Re: Docket No. 060368-WS


Dear Ms. Cole:

Enclosed for filing on behalf of Aqua Utilities Florida, Inc. ("AUF") are the original and fifteen copies of Aqua's Notice of Filing Affidavit of Mailing Notices of Customer Service Hearings for Captiva, Green Acres, Chipley, Palatka and Gainesville Service Hearings.

Please acknowledge receipt of these documents by stamping the extra copy of this letter "filed" and returning the copy to me.


Thank you for your assistance with this filing.

Sincerely,


Kenneth A. Hoffman

KAH/rl
Enclosures
cc: All Parties of Record

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RECEIVED & FILED

FPSC-BUREAU OF RECORDS

DOCUMENT NUMBER-DATE
03819 MAY-7 5
FPSC-COMMISSION CLERK

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In Re: Application for increase in water and)
wastewater rates in Alachua, Brevard,)
Highlands, Lake, Lee, Marion, Orange,)
Palm Beach, Pasco, Polk, Putnam,)
Seminole, Sumter, Volusia, and Washington)
Counties by Aqua Utilities Florida, Inc.)
_____)

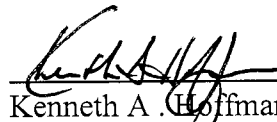
Docket No. 060368-WS

Filed: May 7, 2007

**AQUA UTILITIES FLORIDA, INC.'S
NOTICE OF FILING AFFIDAVIT OF
MAILING NOTICES OF CUSTOMER SERVICE
HEARINGS FOR CAPTIVA, GREEN ACRES,
CHIPLEY, PALATKA AND GAINESVILLE
SERVICE HEARINGS**

Aqua Utilities Florida, Inc. ("AUF"), by and through its undersigned counsel, hereby files and serves Notice of filing the attached Affidavit of Mailing Notices of Customer Service Hearings for Captiva, Green Acres, Chipley, Palatka and Gainesville Service Hearings.

Respectfully submitted this 7th day of May, 2007.



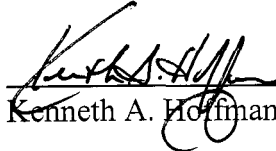
Kenneth A. Hoffman, Esquire
Marsha E. Rute, Esquire
Rutledge, Ecenia, Purnell & Hoffman, P.A.
P.O. Box 551
Tallahassee, Florida 32302 -0551
(850) 681- 6788 (Telephone)
(850) 681 - 6515 (Facsimile)

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of the foregoing was furnished by U. S. Mail this 7th day of May, 2007 to the following:

Stephen C. Reilly, Esq.
Associate Public Counsel
Office of Public Counsel
111 West Madison Street
Room 812
Tallahassee, FL 32399-1400

Rosanne Gervasi, Esq.
Ralph Jaeger, Esq.
Katherine Fleming, Esq.
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850



Kenneth A. Hoffman, Esq.

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Application for increase in water)
And wastewater rates in Alachua, Brevard,)
Highlands, Lake, Lee, Marion, Orange, Palm)
Beach, Pasco, Polk, Putnam, Seminole,)
Sumter, Volusia, and Washington Counties)
by AquaSource Utility, Inc. d/b/a Aqua)
Utilities Florida, Inc., Arredondo Utility)
Company, Inc. d/b/a Aqua Utilities)
Florida, Inc., Jasmine Lakes Utilities)
Corporation d/b/a Aqua Utilities)
Florida, Inc., Crystal River Utilities, Inc.)
d/b/a Aqua Utilities Florida, Inc., Ocala)
Oaks Utilities, Inc. d/b/a Aqua Utilities)
Florida, Inc. and Aqua Utilities Florida, Inc.)

Docket No. 060368-WS
Filed: May 7, 2007

**AFFIDAVIT OF MAILING NOTICES OF
CUSTOMER SERVICE HEARINGS FOR
CAPTIVA, GREEN ACRES, CHIPLEY,
PALATKA AND GAINESVILLE SERVICE HEARINGS**

STATE OF FLORIDA

COUNTY OF LAKE

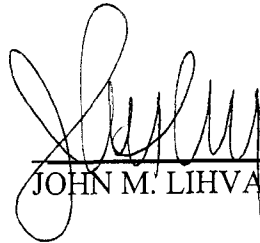
BEFORE ME, the undersigned authority, authorized to administer oaths and take acknowledgments, personally appeared JOHN M. LIHVARIK, who after being duly sworn on oath, deposes and states as follows:

1. That I am employed by Aqua Utilities Florida, Inc. ("AUF") as its Vice-President and Chief Operating Officer. As part of my duties and responsibilities, and under my direction and supervision, AUF, pursuant to Rule 25-22.0407(06)(a), Florida Administrative Code, provided Notices of the following Customer Service Hearings to the customers of the following systems:

<u>Location</u>	<u>Systems</u>
Captiva	South Seas
Green Acres	Lake Osborne
ChIPLEY	Sunny Hills
Palatka and Gainesville	Arredondo Estates, Arredondo Farms

2. Copies of such Notices of Customers Service Hearings, in the forms attached hereto as Composite Exhibit A, were provided by regular United States Mail, on April 23, 2007. A copy of the documentation verifying the mailing of said Notices on April 23, 2007 is attached hereto as Exhibit B.

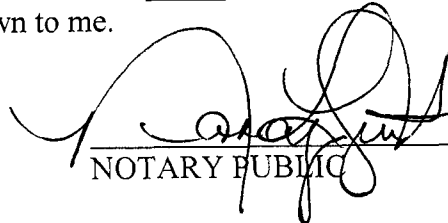
3. Further Affiant sayeth not.



 JOHN M. LIHVARIK

State of Florida
 County of Lake

Sworn to and subscribed before me this 4th day of May, 2007, by JOHN M. LIHVARIK, who is personally known to me.



 NOTARY PUBLIC

My Commission Expires:



Legal Notice

Notice of Commission Customer Service Hearings

RE: Application by Aqua Utilities Florida, Inc. (Utility) for rate increase in Alachua, Brevard, Highlands, Lake, Lee, Marion, Orange, Palm Beach, Pasco, Polk, Putnam, Seminole, Sumter, Volusia and Washington counties, Florida. (Docket No. 060368-WS)

Date of Publication: April 20, 2007

Notice is hereby given that the Florida Public Service Commission will hold customer service hearings in the above-referenced docket to consider the Utility's application for an increase in water and wastewater rates in Alachua, Brevard, Highlands, Lake, Lee, Marion, Orange, Palm Beach, Pasco, Polk, Putnam, Seminole, Sumter, Volusia and Washington counties, Florida. The purpose of the customer service hearings is to allow customers the opportunity to comment on the Utility's proposed final rates or service. The nearest customer service hearing to you will be conducted at the following time and place:

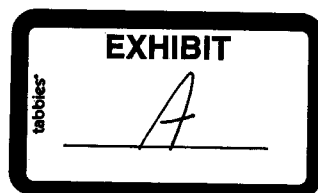
Date and Time: May 10, 2007 at 10:00 a.m.

Place: South Seas Island Resort
5400 Plantation Road
Captive, FL 33924

At the hearing, customers will be given opportunity to present testimony and other evidence concerning the Utility's proposed rates or service. All witnesses shall be subject to cross-examination at the conclusion of their testimony.

Any customer comments regarding the Utility's service or the proposed rate increase should be addressed to the Office of Commission Clerk, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850. Such comments should identify Docket No. 060368-WS assigned to this proceeding.

Any person requiring some accommodation at this hearing because of a physical impairment should call the Commission's Division of Regulatory Compliance and Consumer Assistance at 800.342.3552 at least 48 hours 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 800.955.8771 (TDD).



Legal Notice

Notice of Commission Customer Service Hearings

RE: Application by Aqua Utilities Florida, Inc. (Utility) for rate increase in Alachua, Brevard, Highlands, Lake, Lee, Marion, Orange, Palm Beach, Pasco, Polk, Putnam, Seminole, Sumter, Volusia and Washington counties, Florida. (Docket No. 060368-WS)

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Date and Time: May 11, 2007 at 10:30 a.m.

Place: Palm Beach County Library System - Green Acres Branch
3750 Jog Road
Green Acres, FL 33467

At the hearing, customers will be given opportunity to present testimony and other evidence concerning the Utility's proposed rates or service. All witnesses shall be subject to cross-examination at the conclusion of their testimony.

Any customer comments regarding the Utility's service or the proposed rate increase should be addressed to the Office of Commission Clerk, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850. Such comments should identify Docket No. 060368-WS assigned to this proceeding.

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Legal Notice

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RE: Application by Aqua Utilities Florida, Inc. (Utility) for rate increase in Alachua, Brevard, Highlands, Lake, Lee, Marion, Orange, Palm Beach, Pasco, Polk, Putnam, Seminole, Sumter, Volusia and Washington counties, Florida. (Docket No. 060368-WS)

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Date and Time: May 14, 2007 at 10:00 a.m. (Central Time)

Place: Washington County Commission
Commissioners' Board Room
1331 South Blvd.
Chipley, FL 32428

At the hearing, customers will be given opportunity to present testimony and other evidence concerning the Utility's proposed rates or service. All witnesses shall be subject to cross-examination at the conclusion of their testimony.

Any customer comments regarding the Utility's service or the proposed rate increase should be addressed to the Office of Commission Clerk, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850. Such comments should identify Docket No. 060368-WS assigned to this proceeding.

Any person requiring some accommodation at this hearing because of a physical impairment should call the Commission's Division of Regulatory Compliance and Consumer Assistance at 800.342.3552 at least 48 hours 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 800.955.8771 (TDD).

Legal Notice

Notice of Commission Customer Service Hearings

RE: Application by Aqua Utilities Florida, Inc. (Utility) for rate increase in Alachua, Brevard, Highlands, Lake, Lee, Marion, Orange, Palm Beach, Pasco, Polk, Putnam, Seminole, Sumter, Volusia and Washington counties, Florida. (Docket No. 060368-WS)

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Date and Time: May 16, 2007 at 10:00 a.m.

Place: St. Johns Water Management District
Resource Management Building Rooms 136A&B
4049 Reid Street
Palatka, FL 32177

Date and Time: May 16, 2007 at 6:00 p.m.

Place: City Commission Chambers
Gainesville City Hall
200 East University Avenue
Gainesville, FL 32601

At the hearing, customers will be given opportunity to present testimony and other evidence concerning the Utility's proposed rates or service. All witnesses shall be subject to cross-examination at the conclusion of their testimony.

Any customer comments regarding the Utility's service or the proposed rate increase should be addressed to the Office of Commission Clerk, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850. Such comments should identify Docket No. 060368-WS assigned to this proceeding.

Any person requiring some accommodation at this hearing because of a physical impairment should call the Commission's Division of Regulatory Compliance and Consumer Assistance at 800.342.3552 at least 48 hours 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 800.955.8771 (TDD).

United States Postal Service
Postage Statement — First-Class Mail and Priority Mail

USPS Only: Note Mail Arrival Date & Time

Car

MAILER - Use this form for either First-Class Mail or Priority Mail. They may not be combined.

Permit Holder's Name and Address, and Email Address if Any AQUA UTILITIES FL 1100 THOMAS AVE JERESBURG, FL 34748	Telephone	Name and Address of Mailing Agent (if other than permit holder) <i>Innovative 749 Pike Springs Rd Phoenixville, PA 19400</i>	Telephone	Name and Address of Individual or Organization for Which Mailing is Prepared (if other than permit holder) IPG PO# 50804-005 CHIPLEY, CAPTIVA, GREEN ACRES
CAPS Cust. Ref. ID _____ Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____

MAILING

Post Office of Mailing Southeastern PA	Processing Category <input checked="" type="checkbox"/> Letters <input type="checkbox"/> Parcels <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM 301.3)	Mailing Date 04/20/2007	Federal Agency Cost Code	Statement Seq. No.	No. and type of Containers 1' MM 4 2' MM 1 2' EMM Total Ltr. Trays 5 Flat Trays Sacks N/A
Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Precanceled Stamps <input type="checkbox"/> Metered	Weight of a Single Piece 0.0312 pounds	Total Pieces 1257	Total Weight 35.22		
Permit # 1221	For Mail Enclosed Within Another Class <input type="checkbox"/> Bound Printed Matter <input type="checkbox"/> Library Mail	<input type="checkbox"/> Periodicals <input type="checkbox"/> Standard Mail <input type="checkbox"/> Media Mail <input type="checkbox"/> ParcelPost			
For Automation Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.1.3) 03/28/2007	For Enhanced Carrier Route Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.1.3) 03/28/2007				

POSTAGE

Parts Completed (select all that apply) A B C D E F S

Total Postage (Add section totals)	\$435.46
Rate at Which Postage Affixed (Check one) (DMM 234.1.1) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither	_____ pcs. x \$ _____ = Postage Affixed
Net Postage Due (Subtract postage affixed from total postage)	\$435.46
For USPS Use Only: Additional Postage Payment (State reason)	
For postage affixed add additional payment to net postage due; for permit imprint add additional payment to total postage.	Total Adjusted Postage Affixed
Permit Imprint Only - Check One PM: Report Total Postage In AIC: <input type="checkbox"/> AIC 121 (First-Class Mail) <input type="checkbox"/> AIC 237 (Priority Mail)	Total Adjusted Postage Permit Imprint

CERTIFICATION

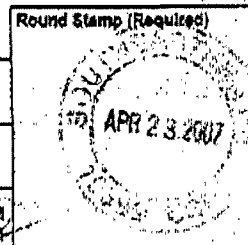
The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control. The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation. I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Privacy Notice: For information regarding our Privacy Policy visit www.usps.com

Signature of Mailer or Agent	Printed Name of Mailer or Agent Signing Form	Telephone 610-530-5100
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USPS USE ONLY

Weight of a Single Piece <i>0</i> pounds	Are postage figures at left adjusted from mailer's entries? If yes, reason: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Total Pieces	Total Weight		
Total Postage			
Check One (if applicable) <input checked="" type="checkbox"/> Presort 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 postage rates claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of annual fee (if required).			
Verifying Employee's Signature	Print Verifying Employee's Name	Time	AM PM



First-Class Mail

Part A

Automation Rates — Letters

Entry	Rate Category	Piece Rate X	No. of Pieces =	Pieces Subtotal	PLUS	Pound Rate X	Pounds =	Pound Subtotal	TOTAL
A2	5-Digit	0.2930 X	523 = \$	153.2390		0.2370 X	= \$		153.2390
A4	AADC	0.3170 X	1 = \$	0.3170		0.2370 X	= \$		0.3170
A5	Mixed AADC	0.3260 X	62 = \$	20.2120		0.2370 X	= \$		20.2120

Part A Total

\$ 173.768

Part C

Nonautomation Rates — Letters, Flats, and Parcels

Entry	Rate Category	Piece Rate X	No. of Pieces =	Pieces Subtotal	PLUS	Pound Rate X	Pounds =	Pound Subtotal	TOTAL
C2	Single-Piece	0.3900 X	671 = \$	23.0100		0.2400 X	= \$		23.0100

Part C Total

\$ ~~23.010~~

261.68

United States Postal Service
Postage Statement — First-Class Mail and Priority Mail

USPS Only: Note Mail Arrival Date & Time


MAILER - Use this form for either First-Class Mail or Priority Mail. They may not be combined.

Permit Holder's Name and Address, and Email Address If Any AQUA UTILITIES FL 1100 THOMAS AVE LEESBURG, FL 34748	Telephone	Name and Address of Mailing Agent (if other than permit holder) <i>Innovative 149 Pike Spring Rd Phoenixville, PA 19400</i>	Telephone	Name and Address of Individual or Organization for Which Mailing is Prepared (if other than permit holder) IPG PO# 50804-005 GAINESVILLE
CAPS Cust. Ref. ID _____ Dun & Bradstreet No. _____		Dun & Bradstreet No. _____		Dun & Bradstreet No. _____

MAILING

Post Office of Mailing Southeastern PA	Processing Category <input checked="" type="checkbox"/> Letters <input type="checkbox"/> Parcels <input type="checkbox"/> Flats <input type="checkbox"/> Automation Flats (DMM 301.3)	Mailing Date 04/20/2007	Federal Agency Cost Code	Statement Seq. No.	No. and type of Containers 1' MM 10 2' MM X Total Ltr. Trays 1X Flat Trays Sacks N/A
Type of Postage <input checked="" type="checkbox"/> Permit Imprint <input type="checkbox"/> Pre-cancelled Stamps <input type="checkbox"/> Metered	Weight of a Single Piece 0.0312 pounds	Total Pieces 4,649	Total Weight 145.2813		
Permit # 1221	For Mail Enclosed Within Another Class <input type="checkbox"/> Sound Printed Matter <input type="checkbox"/> Library Mail	<input type="checkbox"/> Periodicals <input type="checkbox"/> Standard Mail <input type="checkbox"/> Media Mail <input type="checkbox"/> Parcel Post			
For Automation Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.1.3) 04/17/2007		For Enhanced Carrier Route Rate Pieces, Enter Date of Address Matching and Coding (DMM 708.1.3) 04/17/2007			

POSTAGE

Parts Completed (select all that apply) A B C D E F S

Total Postage (Add section totals)	\$ 1,401.89
Rate at Which Postage Affixed (Check one) (DMM 234.1.1) <input type="checkbox"/> Correct <input type="checkbox"/> Lowest <input type="checkbox"/> Neither	_____ pcs. x \$ _____ = Postage Affixed
Net Postage Due (Subtract postage affixed from total postage)	\$ 1,401.89
For USPS Use Only: Additional Postage Payment (State reason)	
For postage affixed add additional payment to net postage due; for permit imprint add additional payment to total postage.	Total Adjusted Postage Affixed
Permit Imprint Only - Check One PM: Report Total Postage in AIC: <input type="checkbox"/> AIC 121 (First-Class Mail) <input type="checkbox"/> AIC 237 (Priority Mail)	Total Adjusted Postage Permit Imprint

CERTIFICATION

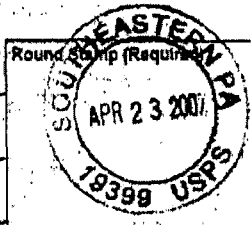
The mailer's signature certifies acceptance of liability for and agreement to pay any revenue deficiencies assessed on this mailing, subject to appeal. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control. The mailer hereby certifies that all information furnished on this form is accurate, truthful, and complete; that the mail and the supporting documentation comply with all postal standards and that the mailing qualifies for the rates and fees claimed; and that the mailing does not contain any matter prohibited by law or postal regulation. I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment.

Privacy Notice: For information regarding our Privacy Policy visit www.usps.com

Signature of Mailer or Agent	Printed Name of Mailer or Agent Signing Form	Telephone 610-539-5100
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USPS USE ONLY

Weight of a Single Piece 0.0312 pounds	Are postage figures at left adjusted from mailer's entries? If yes, reason: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total Pieces 4649	Total Weight 54.04		
Total Postage 1401.89	2566 \$ 15C 9990		
Check One (if applicable) <input type="checkbox"/> Presort Verification Not Scheduled <input checked="" 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 postage rates claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; and (4) payment of annual fee (if required).			
Verifying Employee's Signature <i>C. Duncan</i>	Print Verifying Employee's Name DUNCAN	Time 6:00 AM	



First-Class Mail

Part A

Automation Rates — Letters

Entry	Rate Category	Piece Rate X	No. of Pieces =	Pieces Subtotal	PLUS	Pound Rate X	Pounds =	Pound Subtotal	TOTAL
A2	5-Digit	0.2930 X	3,749 = \$	1,098.4570		0.2370 X	= \$		1,098.4570
A3	3-Digit	0.3080 X	180 = \$	55.4400		0.2370 X	= \$		55.4400
A4	AADC	0.3170 X	239 = \$	75.7630		0.2370 X	= \$		75.7630
A5	Mixed AADC	0.3260 X	240 = \$	78.2400		0.2370 X	= \$		78.2400

Part A Total

\$ 1,307.900

Part C

Nonautomation Rates — Letters, Flats, and Parcels

Entry	Rate Category	Piece Rate X	No. of Pieces =	Pieces Subtotal	PLUS	Pound Rate X	Pounds =	Pound Subtotal	TOTAL
C2	Single-Piece	0.3900 X	241 = \$	93.9900		0.2400 X	= \$		93.9900

Part C Total

\$ 93.990