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REPLY TO CENTRAL FLORIDA OFFICE

MARTIN S. FRIEDMAN, P.A.
VALERIE L. LORD
BRIAN J. STREET

July 16, 2007

VIA HAND DELIVERY

Ann Cole, Commission Clerk
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399

(WS812)

070413-WS

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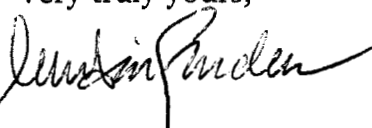
RE: Docket No.: _____; S. V. Utilities, Ltd.'s Application for Staff Assisted Rate Case
Our File No.: 42038.01

Dear Ms. Cole:

CMP _____ Enclosed is the Application of S. V. Utilities, Ltd., for a Staff Assisted Rate Case for
COM _____ its utility system in Polk County, Florida.

CTR _____ This Application is being filed simultaneously with 4 other small utilities in Polk
ECR _____ County since there will be some allocations of common expenses.

- GCL _____
- OPC 1
- RCA _____
- SCR _____
- SGA _____
- SEC _____
- OTH _____

Very truly yours,


MARTIN S. FRIEDMAN
For the firm

MSF/mp
Enclosures

cc: Mr. Ron Baxley (w/o enclosure)

M:\1 ALTAMONTE\S.V. UTILITIES, LTD\PSC Clerk 01.ltr.wpd

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FLORIDA PUBLIC SERVICE COMMISSION

070413-WS

APPLICATION FOR A
STAFF ASSISTED RATE CASE

ORIGINAL

I. General Data

A. Name of utility S.V. UTILITIES, LTD

B. Address 500 SOUTH FLORIDA AVE., STE. 700
LAKELAND, FL 33801

1. Telephone Nos. (863) 647-1581

2. County POLK Nearest City _____

3. General area served SWISS VILLAGE MOBILE HOME PARK; HIDDEN COVE
EAST MOBILE HOME PARK; HIDDEN COVE WEST MOBILE HOME PARK

C. Authority:

1. Water Certificate No. 605-W Date Received 6/22/99

2. Wastewater Certificate No. 521-S Date Received 6/22/99

3. Date utility started operations: Water 1981 Wastewater 1981

D. How system was acquired BUILT

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
LIMITED PARTNERSHIP

F. Ownership & Officers:

Name	Title	Percent Ownership
1. <u>TODD MAXWELL, Pres. of G.P</u>		
2. <u>CENTURY DECKY PUMPS, INC.</u>	<u>G.P</u>	<u>1%</u>
3. <u>ANITA MAXWELL</u>	<u>L.P</u>	<u>99%</u>
4. _____		

G. List of Associated Companies and Addresses:

1. ANGLEYS COVE WEST, LTD.
2. HIDDEN COVE, LTD.
3. CHC VII, LTD
4. PLANTATION LANDINGS, LTD.

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):

Martin S. Friedman, Esquire
Rose, Sundstrom & Bentley, LLP
2180 W. State Road 434, Suite 2118
Longwood, FL 32779

II. Accounting Data

A. Outside Accountant

1. Name SIM D. LEE, CPA
2. Firm _____
3. Address 500 SOUTH FLORIDA AVE, STE 640, LAKE LAND, FL 33801
4. Telephone (863) 647-1581

B. Individual to contact on accounting matters:

1. Name SIM D. LEE, CPA
2. Telephone (863) 647-1581

C. Location of books and records COMPANY OFFICE

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

Date Last Filed 5/1/07

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)

	2006	2005
1. Water		
Cost of Plant In Service:	\$ <u>488,958</u>	\$ <u>488,958</u>
Less Accumulated Depreciation:	<u>384,002</u>	<u>373,238</u>
Less Contributed Plant:	<u>0</u>	<u>0</u>
Net Owner's Investment:	\$ <u>104,956</u>	\$ <u>115,720</u>

2. Wastewater	2006	2005
Cost of Plant In Service:	\$ <u>1,417,219</u>	\$ <u>1,417,219</u>
Less Accumulated Depreciation:	<u>1,190,119</u>	<u>1,177,089</u>
Less Contributed Plant:	<u>0</u>	<u>0</u>
New Owner's Investment:	\$ <u>227,100</u>	\$ <u>240,130</u>

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

1. Water	2006	2005
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	\$ <u>73,554</u>	\$ <u>70,858</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>73,554</u>	\$ <u>70,858</u>
Less Expenses:		
a. Salaries & Wages - Employees	<u>8,948</u>	<u>8,125</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Water	_____	_____
e. Purchased Power	<u>12,922</u>	<u>10,329</u>
f. Fuel for Power Production	_____	_____
g. Chemicals	<u>3,343</u>	<u>2,051</u>
h. Materials & Supplies	<u>5,689</u>	<u>3,754</u>
i. Contractual Services	<u>24,144</u>	<u>20,889</u>
j. Rents	_____	_____
k. Transportation Expenses	<u>141</u>	<u>966</u>
l. Insurance Expense	<u>134</u>	<u>130</u>
m. Regulatory Commission Expense	<u>3,310</u>	<u>3,188</u>
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	<u>4,138</u>	<u>482</u>
p. Depreciation Expense	<u>10,878</u>	<u>10,878</u>
q. Property Taxes	<u>137</u>	<u>140</u>
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	(\$ <u>230</u>)	\$ <u>9,926</u>

2. Wastewater	2000	2005
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	<u>166,453</u>	<u>70,859</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>166,453</u>	\$ <u>70,859</u>
Less Expenses:		
a. Salaries & Wages - Employees	\$ <u>8,948</u>	\$ <u>8,125</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Wastewater Treatment	_____	_____
e. Sludge Removal Expense	<u>13,020</u>	<u>22,970</u>
f. Purchased Power	<u>13,549</u>	<u>10,718</u>
g. Fuel for Power Production	_____	_____
h. Chemicals	<u>6,934</u>	<u>4,259</u>
i. Materials & Supplies	<u>16,281</u>	<u>28,406</u>
j. Contractual Services	<u>36,926</u>	<u>54,056</u>
k. Rents	<u>3,144</u>	_____
l. Transportation Expenses	<u>1,170</u>	<u>966</u>
m. Insurance Expense	<u>134</u>	<u>130</u>
n. Regulatory Commission Expense	<u>2,990</u>	<u>3,189</u>
o. Bad Debt Expense	_____	_____
p. Miscellaneous Expense	<u>3,000</u>	<u>1,221</u>
q. Depreciation Expense	<u>13,122</u>	<u>13,122</u>
r. Property Taxes	<u>590</u>	<u>601</u>
s. Other Taxes	_____	_____
t. Income Taxes	_____	_____
Operating Income (Loss)	<u>(\$ 53,355)</u>	<u>(\$ 76,904)</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>NONE</u>	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

- I. Indicate Type of Tax Return Filed:
- _____ Form 1120 - Corporation
 - _____ Form 1120S - Subchapter S Corporation
 - X Form 1065 - Partnership
 - _____ Form 1040 - Schedule C - Individual (Proprietorship)

III. Engineering Data

A. Outside Engineering Consultant:

- 1. Name _____
- 2. Firm _____
- 3. Address _____
- 4. Telephone (____) _____

B. Individual to contact on engineering matters:

- 1. Name _____
- 2. Telephone (____) _____

C. Is the utility under citation by the Department of Environmental Protection (DEP) 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 DEP operator certificate number (s) held. JERRY

CORYELL - CLASS C WATER AND WASTEWATER LICENSES

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 _____
under construction 0 proposed 0

- 2. Type and make of present treatment facilities Concrete - Extended Air

- 3. Approximate average daily flow of treatment plant effluent 39,562

4. Approximate length of wastewater mains:

Size (diameter)	<u>4"</u>	<u>6"</u>	<u>8"</u>	_____	_____
Linear feet	<u>2600</u>	<u>9700</u>	<u>16287</u>	_____	_____

- 5. Number of manholes 54

- 6. Number of liftstations 4

- 7. How do you measure treatment plant effluent? flow meter

8. Is the treatment plant effluent chlorinated? Yes If yes, what is the normal dosage rate? 5 gallons per day
9. Tap in fees - Wastewater \$ 0
10. Service availability fees - Wastewater \$ 0
11. Note DEP Treatment Plant Certificate Number and date of expiration: Number FLA013102
Expiration Date _____
12. Total gallons treated during most recent twelve months 14,440,000
13. Wastewater treatment purchased during most recent twelve months 0

H. Water

1. Gallons per day capacity of treatment facilities existing 234,000 under construction 0 proposed 0
2. Type of treatment Chlorination
3. Approximate average daily flow of treated water 210,000
4. Source of water supply GROUND
5. Types of chemicals used and their normal dosage rates Liquid Chlorine
30 gallons/day
6. Number of wells in service 1 Total capacity in gallons per minute (gpm) _____
- | | | | |
|---------------------|-----------------|-------|-------|
| Diameter/Depth | <u>8" 1530'</u> | _____ | _____ |
| Motor horsepower | <u>30</u> | _____ | _____ |
| Pump capacity (gpm) | _____ | _____ | _____ |
7. Reservoirs and/or hydropneumatic tanks:
- | | | | |
|-------------|---------------------|-------|-------|
| Description | <u>STEEL GROUND</u> | _____ | _____ |
| Capacity | <u>8,000</u> | _____ | _____ |
8. High service pumping:
- | | | | |
|---------------------|------------|-------|-------|
| Motor horsepower | <u>1/2</u> | _____ | _____ |
| Pump capacity (gpm) | _____ | _____ | _____ |
9. How do you measure treatment plant production? FLOW METERS FROM WELLS
10. Approximate feet of water mains:
- | | | | | |
|-----------------|------------|--------------|------------|--------------|
| Size (diameter) | <u>1"</u> | <u>2"</u> | <u>4"</u> | <u>6"</u> |
| Linear feet | <u>165</u> | <u>15330</u> | <u>950</u> | <u>17075</u> |
11. Note any fire flow requirements and imposing government agency _____
12. Number of fire hydrants in service 49

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 DEP? Yes
17. Total gallons pumped during most recent twelve months 83,524
18. Total gallons sold during most recent twelve months 47,805
19. Gallons unaccounted for during most recent twelve months 35,719
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 sheets if more space is needed):

1. Water: Wastewater

- a. Residential Water \$ 15.71 (incl. 8,000) 8,000 - 10,000 - 1.31/thousand
- b. General Service over 10,000 - 2.09/thousand
- c. Special Contract _____
- d. Other _____

~~2. Wastewater:~~

- ~~a. Residential Wastewater _____~~
- ~~b. General Service _____~~
- ~~c. Special Contract _____~~
- ~~d. Other _____~~

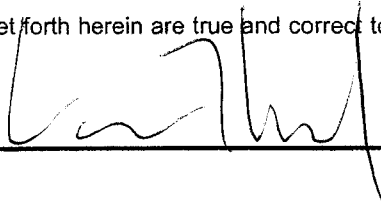
C. Number of Customers (Most recent two years):

- | | | |
|---------------------|-------------|-------------|
| 1. Water Metered | <u>2006</u> | <u>2005</u> |
| a. Residential | <u>722</u> | _____ |
| b. General Service | <u>6</u> | _____ |
| c. Special Contract | _____ | _____ |
| d. Other - Specify | _____ | _____ |
| 2. Water Unmetered | <u>20</u> | <u>20</u> |
| a. Residential | _____ | _____ |
| b. General Service | _____ | _____ |
| c. Special Contract | _____ | _____ |
| d. Other - Specify | _____ | _____ |

3. Wastewater	20 <u>04</u>	20 <u>05</u>
a. Residential	722	_____
b. General Service	6	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____

V. Affirmation

I, TODD MAXWELL 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 _____

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.