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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

(WS 817)

070417-WS

RECEIVED-FPSC
07 JUL 16 AM 11:15
COMMISSION CLERK

RE: Docket No.: _____; Anglers Cove West, Ltd.'s Application for Staff Assisted Rate Case
Our File No.: 42034.01

Dear Ms. Cole:

Enclosed is the Application of Plantation Landings, Ltd., for a Staff Assisted Rate Case for its utility system in Polk County, Florida.

- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC 1
- RCA _____
- SCR _____
- SGA _____
- SEC _____
- OTH _____

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

Very truly yours,



MARTIN S. FRIEDMAN
For the firm

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

DOCUMENT NUMBER-DATE

05925 JUL 16 05

FPSC-COMMISSION CLERK

ORIGINAL

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

070417-WS

I. General Data

A. Name of utility ANGLERS COVE WEST, LTD

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

1. Telephone Nos. (803) 647-1581

2. County POLK Nearest City _____

3. General area served ANGLERS COVE MOBILE HOME PARK
ANGLERS COVE WEST MOBILE HOME PARK

C. Authority:

1. Water Certificate No. 610-W Date Received 6/21/99

2. Wastewater Certificate No. 526-S Date Received 6/21/99

3. Date utility started operations: Water 1986 Wastewater 1986

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. TODD MAXWELL	Pres. of G.P.	
2. ATA PROPERTIES, INC.	G.P.	10%
3. MILDRED MOATS	L.P.	10%
4. JOHN MAXWELL	L.P.	10%
5. T & A INVESTMENTS, INC.	L.P.	70%

PSC/ECR 2 (Rev. 3/02)

G. List of Associated Companies and Addresses:

1. S.V. UTILITIES, LTD
2. CHC VII, LTD
3. PLANTATION LANDINGS, LTD.
4. HIDDEN COVE, 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 JIM D. LEE, CPA
2. Firm _____
3. Address 500 SOUTH FLORIDA AVE., STE. 640, LAKELAND, FL 33801
4. Telephone (863) 647-1581

B. Individual to contact on accounting matters:

1. Name JIM 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>138,002</u>	\$ <u>138,002</u>
Less Accumulated Depreciation:	<u>80,278</u>	<u>73,665</u>
Less Contributed Plant:	<u>0</u>	<u>0</u>
Net Owner's Investment:	\$ <u>57,724</u>	\$ <u>64,337</u>

2. Wastewater	2006	2005
Cost of Plant In Service:	\$ <u>679,310</u>	\$ <u>679,310</u>
Less Accumulated Depreciation:	<u>502,385</u>	<u>496,841</u>
Less Contributed Plant:	<u>0</u>	<u>0</u>
New Owner's Investment:	\$ <u>176,925</u>	\$ <u>182,469</u>

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

1. Water	2006	2005
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	\$ <u>31,521</u>	\$ <u>31,337</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>31,521</u>	\$ <u>31,337</u>
Less Expenses:		
a. Salaries & Wages - Employees	<u>12,454</u>	<u>10,552</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Water	<u>50,026</u>	<u>32,397</u>
e. Purchased Power	_____	_____
f. Fuel for Power Production	_____	_____
g. Chemicals	_____	_____
h. Materials & Supplies	<u>5,527</u>	<u>2,241</u>
i. Contractual Services	<u>52,081</u>	<u>68,057</u>
j. Rents	_____	_____
k. Transportation Expenses	<u>71</u>	<u>200</u>
l. Insurance Expense	<u>4,239</u>	<u>5,202</u>
m. Regulatory Commission Expense	<u>1,418</u>	<u>1,410</u>
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	<u>16,370</u>	<u>14,059</u>
p. Depreciation Expense	<u>6,638</u>	<u>3,706</u>
q. Property Taxes	_____	_____
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	(\$ <u>117,303</u>)	(\$ <u>106,517</u>)

2. Wastewater	20__	20__
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	<u>31,522</u>	<u>31,337</u>
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ <u>31,522</u>	\$ <u>31,337</u>
Less Expenses:		
a. Salaries & Wages - Employees	\$ <u>14,744</u>	\$ <u>13,170</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Wastewater Treatment	_____	_____
e. Sludge Removal Expense	<u>7,090</u>	<u>8,235</u>
f. Purchased Power	<u>6,169</u>	<u>5,014</u>
g. Fuel for Power Production	_____	_____
h. Chemicals	<u>799</u>	<u>2,095</u>
i. Materials & Supplies	<u>8,234</u>	<u>3,194</u>
j. Contractual Services	<u>39,232</u>	<u>82,054</u>
k. Rents	_____	_____
l. Transportation Expenses	<u>871</u>	<u>508</u>
m. Insurance Expense	<u>4,239</u>	<u>5,202</u>
n. Regulatory Commission Expense	<u>1,419</u>	<u>1411</u>
o. Bad Debt Expense	_____	_____
p. Miscellaneous Expense	<u>16,370</u>	<u>14,289</u>
q. Depreciation Expense	<u>5,648</u>	<u>5,648</u>
r. Property Taxes	<u>12,419</u>	<u>7,873</u>
s. Other Taxes	_____	_____
t. Income Taxes	_____	_____
Operating Income (Loss)	(\$ <u>85,712</u>)	(\$ <u>117,356</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>UNION CAPITAL INVEST.</u>	<u>7/05</u>	<u>6,324,764</u>	<u>5.05%</u>	<u>8/15</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 .70 MGD
under construction 0 proposed 0

2. Type and make of present treatment facilities EXTENDED AIR - CONCRETE

3. Approximate average daily flow of treatment plant effluent 36,923

4. Approximate length of wastewater mains:

Size (diameter) 4" 8" _____
Linear feet 2,200 10,271 _____

5. Number of manholes 41

6. Number of liftstations 4

7. How do you measure treatment plant effluent? elapsed time meters

- 8. Is the treatment plant effluent chlorinated? yes If yes, what is the normal dosage rate? 12 gallons/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 DO-53-249486
Expiration Date _____
- 12. Total gallons treated during most recent twelve months 13,477,000
- 13. Wastewater treatment purchased during most recent twelve months 0

H. Water — PURCHASE WATER FROM CITY OF LAKELAND

- 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)	<u>2"</u>	<u>4"</u>	<u>6"</u>	
Linear feet	<u>3700</u>	<u>1025</u>	<u>5835</u>	_____
- 11. Note any fire flow requirements and imposing government agency

- 12. Number of fire hydrants in service 7

13. Do you have a meter change out program? NO METERS
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 0
18. Total gallons sold during most recent twelve months UNMETERED
19. Gallons unaccounted for during most recent twelve months 0
20. Gallons purchased during most recent twelve months 16,759,000

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: ~~Water~~ Wastewater
- a. Residential Water \$15.71 FLAT RATE
- b. General Service _____
- c. Special Contract _____
- d. Other _____

~~2. Wastewater:~~

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

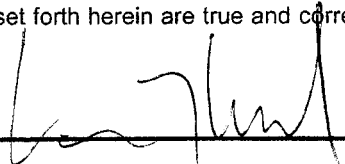
C. Number of Customers (Most recent two years):

1. Water Metered	2006	2005
a. Residential	_____	_____
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
2. Water Unmetered	2006	2005
a. Residential	325	325
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____

3. Wastewater	20 <u>06</u>	20 <u>05</u>
a. Residential	<u>325</u>	<u>325</u>
b. General Service	_____	_____
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.