

PHOENIX ENVIRONMENTAL TECHNOLOGIES

1111 Alameda Ave
Tampa, Florida FL 33607
Phone (727) 409-8700

070601--WU
(WU 179)

RECEIVED-FPSC

07 SEP 17 PM 1:22

COMMISSION
CLERK

September 13, 2007

Public Service Commission
Tallahassee, FL

To Whom this may concern,

Please accept this Staff Assisted Rate Case Review for Orangeland Water Supply. As can be demonstrated, Orangeland Water Supply has been operating at a significant loss for many years.

Fred Snell bought the system in 1972 as an investment. Through the years, as operational costs have increased multi-fold, he has not increased the rates at all. Through misunderstanding, the rate review process was very intimidating.

We put this review in your hands, hoping for a fair increase, both to the customers and for the owner.

If you have any questions, please contact Fred Snell at (727) 372-8330 or (727) 841-7672.

Thank you for your assistance.

Sincerely,

Scott Findlay, Operator

DATE OF COLLECTION

07 SEP 17 AM 10:24

DOCUMENT NUMBER-DATE

08442 SEP 17 5

FPSC-COMMISSION CLERK

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

I. General Data

A. Name of utility Orangeland Water Supply

B. Address 2109 Overview Dr. New Port Richey, FL 34655

1. Telephone Nos. (727) 372-8330 or 727-841-7672

2. County Pasco Nearest City New Port Richey

3. General area served Orangeland Subdivision

C. Authority:

1. Water Certificate No. 6511307 Date Received 1987

2. Wastewater Certificate No. NONE Date Received N/A

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

D. How system was acquired Purchased

If utility was purchased, give date 1972 Amount Paid \$7,000.00

1. Name of Seller Matt Miller - Now Deceased

2. Was seller affiliated with present owners? No

3. Did you purchase: Stock No or assets only Yes

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

F. Ownership & Officers:

<u>Name</u>	<u>Title</u>	<u>Percent Ownership</u>
<u>1. Frederick J. Snell</u>	<u>Owner</u>	<u>50%</u>
<u>2. Betty G. Snell</u>	<u>Owner</u>	<u>50%</u>
<u>3.</u>		
<u>4.</u>		

G. List of Associated Companies and Addresses:

1. NONE
2. _____
3. _____

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):

Scott Findlay, 1103 Ashland Ave, Tarpon Springs,
FL 34689 (727) 939-2024

II. Accounting Data

A. Outside Accountant

1. Name Thomas L. Kehoe
2. Firm Kehoe & DeWeerd CPA
3. Address 6609 Ridge Road New Port Richey, FL 34654
4. Telephone (727) 849-2785

B. Individual to contact on accounting matters:

1. Name Fred J. or Betty G. Snell
2. Telephone (727) 372-8330

C. Location of books and records 2109 Over view Dr. New Port Richey FL

D. Have you filed an Annual Report with the Commission? YES
Date Last Filed March 2007

E. Has your latest semiannual regulatory assessment fee payment been made (January 30 or July 30 whichever is applicable)? Yes, Jan 30

F. Basic Rate Base Data (Most recent two years)

1. Water	2005	2006
Cost of Plant In Service:	\$ <u>30,648.00</u>	\$ <u>38,499.00</u>
Less Accumulated Depreciation:	<u>1,053.00</u>	<u>--</u>
Less Contributed Plant:	_____	_____
Net Owner's Investment:	\$ <u> </u>	\$ <u> </u>

2. Wastewater	20_05	20_06
Cost of Plant In Service:	\$ <u>N/A</u>	\$ _____
Less Accumulated Depreciation:	_____	_____
Less Contributed Plant:	_____	_____
New Owner's Investment:	\$ <u>_____</u>	\$ <u>_____</u>

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

1. Water	2005	2006
Revenues (By Class):		
a. _____	\$ _____	\$ _____
b. _____	_____	_____
c. <u>288W</u>	<u>5,676</u>	<u>6,214</u>
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	<u>1,370</u>	<u>1,922</u>
f. Fuel for Power Production	_____	_____
g. Chemicals	<u>105</u>	<u>122</u>
h. Materials & Supplies	<u>72</u>	<u>80</u>
i. Contractual Services	<u>3,611</u>	<u>6,437</u>
j. Rents	_____	_____
k. Transportation Expenses	<u>105</u>	<u>115</u>
l. Insurance Expense	_____	_____
m. Regulatory Commission Expense	<u>268</u>	<u>279</u>
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	_____	_____
p. Depreciation Expense	_____	_____
q. Property Taxes	<u>271</u>	<u>240</u>
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	\$ <u>5,802</u>	\$ <u>9,195</u>

2. Wastewater	20_05	20_06
Revenues (By Class):	N/A	
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 Wastewater Treatment	_____	_____
e. Sludge Removal Expense	_____	_____
f. Purchased Power	_____	_____
g. Fuel for Power Production	_____	_____
h. Chemicals	_____	_____
i. Materials & Supplies	_____	_____
j. Contractual Services	_____	_____
k. Rents	_____	_____
l. Transportation Expenses	_____	_____
m. Insurance Expense	_____	_____
n. Regulatory Commission Expense	_____	_____
o. Bad Debt Expense	_____	_____
p. Miscellaneous Expense	_____	_____
q. Depreciation Expense	_____	_____
r. Property Taxes	_____	_____
s. Other Taxes	_____	_____
t. Income Taxes	_____	_____
Operating Income (Loss)	\$ _____	\$ _____

H. Outstanding Debt:

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

- I. Indicate Type of Tax Return Filed:
- _____ 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 NONE
- 2. Firm N/A
- 3. Address _____
- 4. Telephone ()

B. Individual to contact on engineering matters:

- 1. Name N/A
- 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:

Scott Findlay B4804

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 N/A
under construction _____ proposed _____
- 2. Type and make of present treatment facilities N/A
- 3. Approximate average daily flow of treatment plant effluent N/A
- 4. Approximate length of wastewater mains:
Size (diameter) _____
Linear feet _____
- 5. Number of manholes _____
- 6. Number of liftstations _____ N/A
- 7. How do you measure treatment plant effluent? _____

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

H. Water

1. Gallons per day capacity of treatment facilities existing _____ under construction N/A proposed N/A
2. Type of treatment Chlorine Injection
3. Approximate average daily flow of treated water 19,320
4. Source of water supply Deep Well
5. Types of chemicals used and their normal dosage rates Chlorine
6. Number of wells in service 2 Total capacity in gallons per minute (gpm) 210
- | | | | |
|---------------------|-----------------|-----------------|----------------|
| Diameter/Depth | <u>4" / 135</u> | <u>4" / 354</u> | <u> / </u> |
| Motor horsepower | <u>7 1/2</u> | <u>5</u> | <u> </u> |
| Pump capacity (gpm) | <u>110</u> | <u>100</u> | <u> </u> |
7. Reservoirs and/or hydropneumatic tanks:
- | | | | |
|-------------|----------------------|------------|------------|
| Description | <u>Pressure Tank</u> | <u> </u> | <u> </u> |
| Capacity | <u>1000</u> | <u> </u> | <u> </u> |
8. High service pumping:
- | | | | | |
|---------------------|------------|------------|------------|------------|
| Motor horsepower | <u>N/A</u> | <u> </u> | <u> </u> | <u> </u> |
| Pump capacity (gpm) | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
9. How do you measure treatment plant production? Water Meter
10. Approximate feet of water mains:
- | | | | | |
|-----------------|------------|------------|------------|------------|
| Size (diameter) | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Linear feet | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
11. Note any fire flow requirements and imposing government agency None
12. Number of fire hydrants in service _____

- 13. Do you have a meter change out program? NO
- 14. Meter installation or tap in fees - Water \$ \$150.00
- 15. Service availability fees - Water \$ NO
- 16. Has the existing treatment facility been approved by DEP? YES
- 17. Total gallons pumped during most recent twelve months 6,800,000
- 18. Total gallons sold during most recent twelve months 6,224,000
- 19. Gallons unaccounted for during most recent twelve months 576,000
- 20. Gallons purchased during most recent twelve months NO

IV. Rate Data

A. Individual to contact on tariff matters:

- 1. Name Fred J. Snell
- 2. Telephone Number (727)372-8330

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

1. Water:

- a. Residential Water \$5.00 first 5,000Gals \$.25 additional
- b. General Service no 1,000 gal
- c. Special Contract no
- d. Other no

2. Wastewater:

- a. Residential Wastewater N/A
- b. General Service _____
- c. Special Contract _____
- d. Other _____

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

- | | | |
|---------------------|------------------------|------------------------|
| 1. Water Metered | <u>20⁰⁵</u> | <u>20⁰⁶</u> |
| a. Residential | <u>4,537,000</u> | <u>6,224,000</u> |
| b. General Service | <u>NO</u> | <u>_____</u> |
| c. Special Contract | <u>NO</u> | <u>_____</u> |
| d. Other - Specify | <u>NO</u> | <u>_____</u> |
| 2. Water Unmetered | <u>20__</u> | <u>20__</u> |
| a. Residential | <u>N/A</u> | <u>N/A</u> |
| b. General Service | <u>_____</u> | <u>_____</u> |
| c. Special Contract | <u>_____</u> | <u>_____</u> |
| d. Other - Specify | <u>_____</u> | <u>_____</u> |

3. Wastewater

2005

2006

- a. Residential
- b. General Service
- c. Special Contract
- d. Other - Specify

N/A

V. Affirmation

I, Frederick J. Snell

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

Frederick J. Snell

Title

Owner

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.