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DEPOSIT DATE  
929 APR 15 2009

CK# 7642  
R 200.00  
4-13-09  
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APPLICATION FOR GRANDFATHER CERTIFICATE  
(Pursuant to Section 367.171, Florida Statutes)

To: Office of Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

RECEIVED-PPSC  
09 APR 15 AM 9:01  
COMMISSION CLERK

The undersigned hereby makes application for original certificate(s) to operate a water X and/or wastewater utility in St Johns County, Florida, and submits the following information:

**PART I** APPLICANT INFORMATION

A) The full name (as it appears on the certificate), address and telephone number of the applicant:

Camachee Cove Yacht Harbor Utility  
Name of utility  
( 904 ) 810-5856 ( 904 ) 829-0396  
Phone No. Fax No.  
3070 Harbor Drive  
Office street address  
St Augustine FL 32084  
City State Zip Code  
Mailing address if different from street address  
Camachee@island.com  
Internet address if applicable

B) The name, address and telephone number of the person to contact concerning this application:

Marlene Upson ( 904 ) 810-5856  
Name Phone No.  
3070 Harbor Drive  
Street address  
St Augustine FL 32084  
City State Zip Code

PSC/ECR 014-R (Rev. 2/91) Check received with filing and forwarded to Fiscal for deposit. Fiscal to forward deposit information to Records.

Initials of person who forwarded check

AM

DOCUMENT NUMBER-DATE

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FPSC-COMMISSION CLERK