

090184-WS

DEPOSIT

929 APR 15 2009

Ch# 12382

\$ 2,000.00

4-13-09

R

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-FPSC  
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 X 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:

North Beach Utilities, Inc.

Name of utility

( 904 ) 824-1806

Phone No.

( 904 ) 826-0897

Fax No.

4125 Coastal Hwy

Office street address

St Augustine

FL

32084

City

State

Zip Code

Mailing address if different from street address

Internet address if applicable

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

Robert "Max" Usina

Name

( 904 ) 824-1806

Phone No.

4125 Coastal Hwy

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

LM

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DOCUMENT NUMBER-DATE

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FPSC-COMMISSION CLERK