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SUNRISE UTILITIES, LLC
P.O. BOX 10186
BROOKSVILLE, FL. 34603
352-302-7406

COMMISSION
CLERK

DISTRIBUTION CENTER
09 OCT 29 AM 7:15
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October 10, 2009

Ann Cole
FPSC.
2540 Shumard Oak Blvd.
Tallahassee, FL. 32399

RE: Application for a staff assisted rate case in Polk County by Sunrise Utilities, LLC

Dear Ms. Cole:

Enclosed please find the application for a staff assisted rate case by Sunrise Utilities, LLC.

Sunrise Utilities is seeking a rate increase to install isolation valves, upgrade holding tanks, a meter replacement program, install new fencing and other CIP as indicated.

Please direct all correspondence for this docket to the above address.

Sincerely,



Mike Smallridge- System Manager
Sunrise Utilities, LLC.

COM
ECR
GCL
OPC
RCP
SSC
SGA
ADM
CLK *Nonage*

SUNRISE UTILITIES, LLC. P.O. BOX 10186 BROOKSVILLE, FL. 34603

DOCUMENT NUMBER-DATE
10951 OCT 29 08
FPSC-COMMISSION CLERK

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

I. General Data

A. Name of utility SUNRISE UTILITIES,LLC
 B. Address P.O. Box 10186
Brooksville, FL. 34603
 1. Telephone Nos. (352)302-7406
 2. County Polk Nearest City AUBURNDALE
 3. General area served SUN ACRES

C. Authority:

1. Water Certificate No. WU-870-08 Date Received _____
 2. Wastewater Certificate No. _____ Date Received _____
 3. Date utility started operations: Water 11/30/03 Wastewater _____

D. How system was acquired _____

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)

1120 corporation

F. Ownership & Officers:

	<u>Name</u>	<u>Title</u>	<u>Percent Ownership</u>
1.	Stuart Sheldon	President	100%
2.			
3.			
4.			

G. List of Associated Companies and Addresses:

1. ALTURAS UTILITIES,LLC
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):

Mike Smallridge
1645 W. Main St.
Inverness, FL. 34450

II. Accounting Data

A. Outside Accountant

1. Name Mike Smallridge
2. Firm _____
3. Address _____
4. Telephone ()

B. Individual to contact on accounting matters:

1. Name Mike Smallridge
2. Telephone ()

C. Location of books and records 6115 St. RD. 60E Bartow, FL.

D. Have you filed an Annual Report with the Commission? YES
Date Last Filed 2008

E. Has your latest regulatory assessment fee payment been made? YES

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

1. Water	2008__	2007__
Cost of Plant In Service:	\$ <u>176,328</u>	\$ <u>176,328</u>
Less Accumulated Depreciation:	<u>(81482)</u>	<u>(71698)</u>
Less Contributed Plant:	_____	_____
Net Owner's Investment:	\$ <u>116824</u>	\$ <u>141667</u>

2. Wastewater	20__	2006__
Cost of Plant In Service:	\$ _____	\$ _____
Less Accumulated Depreciation:	_____	_____
Less Contributed Plant:	_____	_____
New Owner's Investment:	\$ _____	\$ _____
G. Basic Income Statement (Most recent two years):		_____
1. Water	2008__	20_07
Revenues (By Class):		
a. <u>5/8 x 3/4</u>	\$ 61,368	\$ 71,097
b. _____	_____	_____
c. _____	8403	_____
Total Operating Revenues:	\$ 69,771	\$ 71,097
Less Expenses:		_____
a. Salaries & Wages - Employees	_____	_____
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Water	_____	_____
e. Purchased Power	_____	_____
f. Fuel for Power Production	_____	_____
g. Chemicals	_____	_____
h. Materials & Supplies	15184	15913
i. Contractual Services	8882	3542
j. Rents	_____	_____
k. Transportation Expenses	_____	_____
l. Insurance Expense	1899	1823
m. Regulatory Commission Expense	6549	_____
n. Bad Debt Expense	11144	6423
o. Miscellaneous Expense	27289	38906
p. Depreciation Expense	9784	9784
q. Property Taxes	_____	_____
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	\$ (10959)	\$ (11852)

2.	Wastewater	2006__	20__
	Revenues (By Class):		
a.	residential	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
	Total Operating Revenues:	\$ _____	\$ _____
	Less Expenses: 87,696		
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.	ALTURAS UTILITIES.LLC		\$ 5127		
2.	_____	_____	_____	_____	_____
3.	Leasage		\$20551		
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 _____
2. Firm _____
3. Address _____
4. Telephone (____) _____

B. Individual to contact on engineering matters:

1. Name mike Smallridge _____
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.

E. Name of plant operator (s) and DEP operator certificate number (s) held _____

David Blount. Blount Utilities _____

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 _____ proposed _____
2. Type and make of present treatment facilities _____
3. Approximate average daily flow of treatment plant effluent _____
4. Approximate length of wastewater mains:
Size (diameter) _____"
Linear feet _____
5. Number of manholes _____
6. Number of liftstations _____
7. How do you measure treatment plant effluent? _____
8. Is the treatment plant effluent chlorinated? _____ If yes, what is the normal dosage rate?
9. Tap in fees - Wastewater \$ _____
10. Service availability fees - Wastewater \$ _____
11. Note DEP Treatment Plant Certificate Number and date of expiration: _____
12. Total gallons treated during most recent twelve months _____
13. Wastewater treatment purchased during most recent twelve months _____

H. Water

1. Gallons per day capacity of treatment facilities existing 216,000 under construction _____ proposed _____
2. Type of treatment Chlorine _____

3. Approximate average daily flow of treated water 115,000
4. Source of water supply 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)
- | | | | |
|---------------------|----------------------------|----------------------------|-----------------------------------|
| Diameter/Depth | <u>6</u> / <u> </u> | <u>4</u> / <u> </u> | <u> </u> / <u> </u> |
| Motor horsepower | <u>25</u> | <u>10</u> | <u> </u> |
| Pump capacity (gpm) | <u> </u> | <u> </u> | <u> </u> |
7. Reservoirs and/or hydropneumatic tanks:
- | | | | |
|-------------|--------------|--------------|-----------------|
| Description | <u>steel</u> | <u>STEEL</u> | <u> </u> |
| Capacity | <u>3,000</u> | <u>4000</u> | <u> </u> |
8. High service pumping:
- | | | | | |
|---------------------|-----------------|-----------------|-----------------|-----------------|
| Motor horsepower | <u> </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? 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 \$
15. Service availability fees - Water \$
16. Has the existing treatment facility been approved by DEP? yes
17. Total gallons pumped during most recent twelve months 22206311
18. Total gallons sold during most recent twelve months 21475347
19. Gallons unaccounted for during most recent twelve months 730792
20. Gallons purchased during most recent twelve months 0

IV. Rate Data

A. Individual to contact on tariff matters:

1. Name mike Smallridge
2. Telephone Number (352)302-7406

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

1. Water:

- | | |
|----------------------|-------------------------------|
| a. Residential Water | <u>ATTACHED TARIFF SHEETS</u> |
| b. General Service | <u> </u> |
| c. Special Contract | <u> </u> |
| d. Other - Specify | <u> </u> |

2. Wastewater:

- | | |
|---------------------------|-----------------|
| a. Residential Wastewater | <u> </u> |
| b. General Service | <u> </u> |
| c. Special Contract | <u> </u> |
| d. Other - Specify | <u> </u> |


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

	2008__	20_07_
1. Water Metered		
a. Residential	<u>268</u>	<u>161</u>
b. General Service	<u>1</u>	<u>1</u>
c. Special Contract	<u> </u>	<u> </u>
d. Other - Specify	<u> </u>	<u> </u>
2. Water Unmetered	20__	20__
a. Residential	<u> </u>	<u> </u>
b. General Service	<u> </u>	<u> </u>
c. Special Contract	<u> </u>	<u> </u>
d. Other - Specify	<u> </u>	<u> </u>

- | | | | |
|----|----------------------------|--------|-------|
| 3. | Wastewater | 2006__ | 20__ |
| | a. Residential - Metered | _____ | _____ |
| | b. Residential - Unmetered | _____ | _____ |
| | c. General Service | _____ | _____ |
| | d. Special Contract | _____ | _____ |
| | e. Other - Specify | _____ | _____ |

V. Affirmation

I, Michael A. Smallridge 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 System manager

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.

NAME OF COMPANY SUNRISE UTILITIES, LLC

WATER TARIFF

GENERAL SERVICE

RATE SCHEDULE GS

- AVAILABILITY - Available throughout the area served by the Company.
- APPLICABILITY - For water service to all Customers for which no other schedule applies.
- LIMITATIONS - Subject to all of the Rules and Regulations of this tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD - Monthly

<u>RATE</u> -	<u>Meter Size</u>	<u>Base Facility Charge</u>
	5/8 x 3/4	\$ 10.10
	3/4	\$ 15.15
	1"	\$ 25.25
	1 1/2	\$ 50.50
	2"	\$ 80.80
	3"	\$ 161.60
	4"	\$ 252.50
	6"	\$ 505.00

Gallonage Charge
Per 1,000 gallons(In each block)

<u>MINIMUM CHARGE</u> -	0-5,000 \$1.64	10,000 + \$4.92
	5,000-10,000 \$2.46	

TERMS OF PAYMENT - Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE -

TYPE OF FILING - Transfer

STUART SHELDON
ISSUING OFFICER

MANAGER
TITLE

NAME OF COMPANY SUNRISE UTILITIES, LLC

WATER TARIFF

RESIDENTIAL SERVICE

RATE SCHEDULE RS

- AVAILABILITY - Available throughout the area served by the Company.
- APPLICABILITY - For water service for all purposes in private residences and individually metered apartment units.
- LIMITATIONS - Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD - Monthly

<u>RATE</u> -	<u>Meter Size</u>	<u>Base Facility Charge</u>
	5/8 x 3/4	\$ 10.10
	3/4	\$ 15.15
	1"	\$ 25.25
	1 1/2"	\$ 50.50
	2"	\$ 80.80
	3"	\$ 161.50
	4"	\$ 252.50
	6"	\$ 505.00

Gallonge Charge
Per 1,000 Gallons (In each block)

	0-5,000	\$1.64	10,000 +	\$4.92
<u>MINIMUM CHARGE</u> -	5,000-10,000	\$2.46		

TERMS OF PAYMENT - Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE -

TYPE OF FILING - Transfer

STUART SHELDON
ISSUING OFFICER

MANAGER
TITLE

Annual Utility Operating Budget

		PRIOR YEAR 2009	BUDGETED AMOUNTS 2010	ACTUAL 2009
	REVENUE			
	Customers	\$ -	\$ -	\$ -
	One time fees / late fees	\$ -	\$ -	\$ -
	TOTAL REVENUE:	\$ -	\$ -	\$ -
NARUC Acct. No.	UTILITY OPERATION AND MAINTENANCE EXPENSE			
601	Employees' Salaries (meter reading)	\$ -	\$ 3,600.00	\$ -
603	Officers' Salaries	\$ -	TBD	\$ -
604	Employee Pensions and Benefits	\$ -	\$ -	\$ -
610	Bulk Purchased Water / Wastewater	\$ -	\$ -	\$ -
615	Electric Bill	\$ -	\$ 4,800.00	\$ -
618	Chemicals	\$ -	\$ -	\$ -
620	Office Supplies	\$ -	\$ 1,052.00	\$ -
	Postage (other than billing)	\$ -	\$ 528.00	\$ -
	Copier Expense & Paper	\$ -	\$ 200.00	\$ -
630	Contractual Services:			
	Billing	\$ -	\$ 16,400.00	\$ -
	Accounting & bookkeeping	\$ -	\$ 600.00	\$ -
	Legal Services	\$ -	\$ -	\$ -
	Annual Report Expense	\$ -	\$ 495.00	\$ -
	Index Adjustment Expense	\$ -	\$ 400.00	\$ -
	Operator	\$ -	\$ 7,500.00	\$ -
640	Rents	\$ -	\$ 1,200.00	\$ -
650	Vehicle Expense	\$ -	\$ -	\$ -
655	Insurance Expense	\$ -	\$ 1,900.00	\$ -
670	Bad Debt Expense	\$ -	\$ 1,000.00	\$ -
675	Miscellaneous Expenses			
	Corporate Filing Fees	\$ -	\$ 75.00	\$ -
	Licenses and permit fees	\$ -	\$ 55.00	\$ -
	Prof. Assoc. Fees (FRWA, AWWA)	\$ -	\$ -	\$ -
	Bank Fees	\$ -	tbd	\$ -
	Leak Repairs	\$ -	\$ 2,000.00	\$ -
	Sludge Hauling	\$ -	\$ -	\$ -
	Painting (well house, valves, etc.)	\$ -	\$ 250.00	\$ -
	Generator Maintenance and Fuel	\$ -	\$ -	\$ -
	Mowing and grounds maintenance	\$ -	\$ 1,200.00	\$ -
	Telephone Expense	\$ -	\$ -	\$ -
	Utilities (other than electric)	\$ -	\$ -	\$ -
224	Mortgage Payment	\$ -	\$ -	\$ -
	Capital Improvement Costs (CIP)	\$ -	\$ -	\$ -
	Federal income tax	\$ -	\$ -	\$ -
	Local property tax	\$ -	\$ 300	\$ -
	Regulatory assessment fee (4.5% of gross revenue)	\$ -	tbd	\$ -
	County Tax (Polk = 10%)	\$ -	tbd	\$ -
	Other (Specify)	\$ -	\$ -	\$ -
	TOTAL OPERATING EXPENSES	\$ -	\$ 43,555	\$ -
	NET OPERATING INCOME (LOSS) Revenue less expenses:	\$ -	\$ (43,555.00)	\$ -

CURRENT YEAR 2010

LOCATION	ASSET LIST	AVG SERVICE LIFE IN YEARS	REMAINING LIFE IN YEARS	COST TO REPLACE	CURRENT CONDITION	REPLACE / REPAIR?	DATE TO REPLACE OR REPAIR	MOVE TO CIP? Y / N	AMT FOR CIP
	Buildings			\$ 600.00	good	repair	2010	Yes	600.00
	Backflow Prevention Devices						0	-	-
	Blowers						0	-	-
	Communications Equipment						0	-	-
	Customer Meters			\$ 1,500.00	poor	REPLACE	2010-13	Yes	1,500.00
	Electrical Panels						0	-	-
	Generators			\$ 695.00	good	service	2010	Yes	695.00
	Hydrants						0	-	-
	Lift Station Pumps						0	-	-
	Lift Stations						0	-	-
	Master Meter			\$ 1,600.00	good	replace	2013	Yes	1,600.00
	Miscellaneous Equipment			\$ 800.00	fence	replace	2010	Yes	800.00
	Office Furniture and Equipment						0	-	-
	Other Pumping Equipment						0	-	-
	Power Operated Equipment						0	-	-
	Rapid Infiltration / Effluent Ponds						0	-	-
	Supply Mains						0	-	-
	Tanks			\$ 6,000.00	coat		2010	Yes	6,000.00
	Tools, Shop and Garage Equipment						0	-	-
	Trans. & Dist. Mains			\$ 1,500.00	iso valves		2010-2011	yes	-
	Transportation Equipment						0	-	-
	Water Testing Equipment						0	-	-
	Water Treatment Pumps						0	-	-
	Water Treatment Other Equipment						0	-	-
	Well Pumping Equipment						0	-	-
	Wells			\$ 1,100.00	leak	repair	2010	Yes	1,100.00
								CIP	12,295.00

CAPITAL IMPROVEMENTS	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
Buildings	600	-	-	-	-
Backflow Prevention Devices	-	-	-	-	-
Blowers	-	-	-	-	-
Communications Equipment	-	-	-	-	-
Customer Meters	1,500	1,500	1,500	1,500	-
Electrical Panels	-	-	-	-	-
Generators	695	-	-	-	-
Hydrants	-	-	-	-	-
Lift Station Pumps	-	-	-	-	-
Lift Stations	-	-	-	-	-
Master Meter	1,600	-	-	1,600	-
Miscellaneous Equipment	800	-	-	-	-
Office Furniture and Equipment	-	-	-	-	-
Other Pumping Equipment	-	-	-	-	-
Power Operated Equipment	-	-	-	-	-
Rapid Infiltration / Effluent Ponds	-	-	-	-	-
Supply Mains	-	-	-	-	-
Tanks	6,000	-	-	-	-
Tools, Shop and Garage Equipment	-	-	-	-	-
Trans. & Dist. Mains	1,500	1,500	-	-	-
Transportation Equipment	-	-	-	-	-
Water Testing Equipment	-	-	-	-	-
Water Treatment Pumps	-	-	-	-	-
Water Treatment Other Equipment	-	-	-	-	-
Well Pumping Equipment	-	-	-	-	-
Wells	1,100	-	-	-	-
CIP TOTAL BY YEAR	13,795	3,000	1,500	3,100	-