

RECEIVED-FPSC

FLORIDA PUBLIC SERVICE COMMISSION

100359-WS

10 JUL 22 AM 10:04

APPLICATION FOR A STAFF ASSISTED RATE CASE

DISTRIBUTION CENTER
10 JUL 19 AM 7:08

COMMISSION
CLERK

I. GENERAL DATA

CK# 9278
@ 2,000.
7-19-10
RT

A. Name of Utility: **Tymer Creek Utilities, Incorporated**

DEPOSIT DATE

B. Address: **1951 W. Granada Blvd.
Ormond Beach, Florida 32174**

056 JUL 22 2010

1. Telephone Nos.: **(386) 672-9815**

2. County: **Volusia**

Nearest City: **Ormond Beach, FL**

3. General Area Served: **Tymer Creek Subdivision**

C. Authority:

1. Water Certificate No. **303W**

Date Received: **August 1977**

2. Wastewater Certificate No. **252S**

Date Received: **August 1977**

3. Date Utility Started Operations: Water: **8/77**

Wastewater: **8/77**

D. How System Was Acquired: **Built by Owner**

If utility was purchased, give date **N/A**

Amount Paid \$ **N/A**

1. Name of Seller: **N/A**

2. Was seller affiliated with present owners? Yes No **N/A**

3. Did you purchase: Stock or assets only **N/A**

E. Type of Legal Entity:

X Corporation Partnership Sole Proprietorship

F. Ownership & Officers:

COM	Name	Title	Percent Ownership
APA	1. Steve Shirah	President	50%
ECR	2. Stan Shirah	Sec/Tres/Operations Mgr	50%
GCL	3.		
RAD	4.		
SSC			
ADM			
OPC			
CLK			

DOCUMENT NUMBER DATE

05992 JUL 22 0

FPSC-COMMISSION OFFICE

G. List of Associated Companies and Addresses:

Shirah Builders, Inc.
1951 W. Granada Blvd.
Ormond Beach, FL 32174

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):

<u>Name:</u>	<u>Address:</u>
Robert F. Dodrill Sr. (Utility Consultant)	2307 Amherst Avenue, Orlando, FL 32804-5401

II. ACCOUNTING DATA

A. Outside Accountant

- 1. Name: **Doug Martin**
- 2. Firm: **Martin and Associates, PL.**
- 3. Address: **1440 North Nove Rd., Suite 201, Holly Hill, FL 32117**
- 4. Telephone: **(386) 252-6075**

B. Individual To Contact On Accounting Matters:

- 1. Name: **Robert F. Dodrill Sr.**
- 2. Telephone: **(321) 217-6407**

C. Location of Books and Records: **1951 W. Granada Blvd. Ormond Beach, FL 32174**

D. Have you filed an Annual Report with the Commission? Yes No

Date Last Filed: **March 31, 2010**

E. Has your latest Regulatory Assessment Fee Payments been made? Yes and Yes

(January 30 or July 30 whichever is applicable) Jan 30 July 30 W/S

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

1. <u>Water:</u>	2009	2008
Cost of Plant In Service	\$ 205924	\$ 202,082
Less Accumulated Depreciation	120806	115,329
Less Contributed Plant	18162	23,187
Net Owner's Investment	\$ 66956.	\$ 63,566
2. <u>Wastewater:</u>	2009	2008

Cost of Plant In Service	\$ 709212	\$ 707,320
Less Accumulated Depreciation	501049	472,712
Less Contributed Plant	0	9,987
Net Owner's Investment	\$ 208163	\$ 224,621

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

	2009	2008
1. <u>Water</u>		
Revenues (By Class)		
a. Residential	\$ 115459	\$ 112,271
b.		
c.		
Total Operating Revenues:	\$ 115459	\$ 112,271
Less Expenses:		
a. Salaries & Wages - Employees	6,860	9,350.
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	9,282	9,282
c. Employee Pensions & Benefits	4,483	3,650
d. Purchased Water	65,947	62,200
e. Purchased Power		
f. Fuel for Power Production		
g. Chemicals		
h. Materials & Supplies	1,138	1,506
i. Contractual Services	25,453	24,029
j. Rents	3,573	3,403
k. Transportation Expenses	220	280.
l. Insurance Expense	1,200.	1,200
m. Regulatory Commission Expense		
n. Bad Debt Expense	202	794
o. Miscellaneous Expense	3,477.	3,376
p. Depreciation Expense	1,581	1,503
q. Property Taxes	-	1,374
r. Other Taxes	6,637	6,456
s. Income Taxes	0	0
Operating Income (Loss)	\$ (14,594)	\$ (16,102)

2. Wastewater		2009	2008
Revenues (By Class):		\$	\$
a. Residential		<u>204,267</u>	<u>205,427</u>
b.			
c.			
Total Operating Revenues:		<u>\$ 204,267</u>	<u>\$ 205,427</u>
Less Expenses:			
a. Salaries & Wages - Employees		<u>20,693</u>	<u>22,178</u>
b. Salaries & Wages - Officers, Directors, & Majority Stockholders		<u>9,282</u>	<u>9,282</u>
c. Employee Pensions & Benefits		<u>5,479</u>	<u>4,483</u>
d. Purchased Wastewater Treatment		<u>N/A</u>	<u>N/A</u>
e. Sludge Removal Expense		<u>31,348</u>	<u>29,360</u>
f. Purchased Power		<u>16,112</u>	<u>14,891</u>
g. Fuel for Power Production		<u>0</u>	<u>0</u>
h. Chemicals		<u>4,735</u>	<u>4,012</u>
i. Materials & Supplies		<u>834</u>	<u>1,174</u>
j. Contractual Services		<u>60,959.</u>	<u>47,106</u>
k. Rents		<u>16,727</u>	<u>16,144</u>
l. Transportation Expenses			
m. Insurance Expense		<u>2,600</u>	<u>1,300</u>
n. Regulatory Commission Expense		<u>0</u>	<u>510</u>
o. Bad Debt Expense		<u>202.</u>	<u>749</u>
p. Miscellaneous Expense		<u>6,609</u>	<u>7,269</u>
q. Depreciation Expense		<u>19,018</u>	<u>13,194</u>
r. Property Taxes		<u>4,432</u>	<u>3,093</u>
s. Other Taxes		<u>11,581</u>	<u>10,648</u>
t. Income Taxes		<u>0</u>	<u>0</u>
Operating Income (Loss)		<u>\$ (6,254)</u>	<u>\$ 20,034</u>

H. Outstanding Debt:

	Creditor	Date Borrowed	Balance Due	Interest Rate	Expiration Date
1.	<u>Sun Trust</u>	<u>Feb 14, 2008</u>	<u>31,847</u>	<u>4.75%</u>	
	<u>Shirah</u>				
2.	<u>BUilders</u>	<u>Feb 13, 2008</u>	<u>22,226</u>	<u>4.75%</u>	
3.	<u>Steve Shirah</u>	<u>July 6, 2010</u>	<u>5,000</u>	<u>10.00%</u>	
4.					

I. Indicate Type of Tax Return Field:

- 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: **Mark Cadenhead**
- 2. Firm: **Cadenhead Environmental Engineering Services, Inc.**
- 3. Address: **830-13 A1A North #197, Ponte Vedra Beach, FL 32082-3215**
- 4. Telephone: **(904) 307 6824**

B. Individual to contact on engineering matters:

- 1. Name: **Stan Shirah**
- 2. Telephone: **(386) 677 5702**

C. Is the utility under citation by the Department of Environmental Protection (DEP) or County Health Department? If yes, explain: **NO Citation BUT in the permit renewal process, The Florida Department of Environmental Protection requested in a LETTER that Tymber Creek perform the following tasks. 1) Repair minor leaks to the filter tank and chlorine contact chamber 2) Complete a video of the collection system, perform upgrade grouting and complete repairs.**

D. List any known service deficiencies and steps taken to remedy problems: **Related to the permit renewal process and the letter from the DEP mentioned above, the repair schedule and the results of the videography was sent to the DEP.**

E. Name of plant operator(s) and DEP operator certificate number(s) held: **Glenn Wetherell Certificate # 1218**

F. Is the utility serving customers outside of its certificated area? **No**
If yes, explain: **N/A**

G. Wastewater:

- 1. Gallons per day capacity of treatment facilities:
 - a. Existing: **0.131**
 - b. Under Construction: **0**
 - c. Proposed: **0**
- 2. Type and make of present treatment facilities: **Extended Aeration Wetherell Treatment Systems**
- 3. Approximate average daily flow of treatment plant effluent: **.075**

4. Approximate length of wastewater mains:

Size (diameter):	6"	8"		
Linear feet:	4,500 *	17,700 *	* = Approx.	

- 5. Number of manholes: **75 ***
- 6. Number of lift stations: **3**
- 7. How do you measure treatment plant effluent? **Flow Meter**

- 8. Is the treatment plant effluent chlorinated? Yes No
If yes, what is the normal dosage rate? **1.0 Mc/L**
- 9. Tap in fees – Wastewater: \$ **0**
- 10. Service availability fees – Wastewater: \$ **1,050**
- 11. Note DEP Treatment Plant Certificate Number and date of expiration: **FLA011193**
Number Expiration Date: **September 2014**
- 12. Total gallons treated during most recent twelve months: **27,420**
- 13. Wastewater treatment purchased during most recent twelve months: **None or N/A**

H. Water:

- 1. Gallons per day capacity of treatment facilities:
a. Existing: **None (1)** b. Under Construction : **None (1)** c. Proposed: **None (1)**
- 2. Type of treatment: **None (1)**
- 3. Approximate average daily flow of treated water: **67.4**
- 4. Source of water supply: **Note (1) Water Purchased from City of Ormond Beach**
- 5. Types of chemicals used and their normal dosage rates: **N/A (1) above**
- 6. Number of wells in service: **None (1) above**
Total capacity in gallons per minute (gpm): **None (1) above**

Diameter/Depth:	_____ / _____	_____ / _____	_____ / _____
Motor horsepower:	_____	_____	_____
Pump capacity (gpm):	_____	_____	_____

- 7. Reservoirs and/or hydropneumatic tanks: **None (1) above**

Description:	_____	_____	_____
Capacity:	_____	_____	_____

- 8. High service pumping: **None (1) above**

Motor horsepower:	_____	_____	_____	_____
Pump capacity (gpm):	_____	_____	_____	_____

- 9. How do you measure treatment plant production? **None (1) above**

- 10. Approximate feet of water mains:

Size (diameter):	8"	6"	2"	_____
Linear feet:	2,900	11,048	13,012	_____

- 11. Note any fire flow requirements and imposing government agency:

- 12. Number of fire hydrants in service: **28**

13. Do you have a meter change out program? No Yes
14. Meter installation or tap in fees - Water \$ 100.00
15. Service availability fees - Water \$ Same
16. Has the existing treatment facility been approved by DEP? No Yes
17. Total gallons pumped during most recent twelve months: 0
18. Total gallons sold during most recent twelve months: 26,523
19. Gallons unaccounted for during most recent twelve months: 2,475
20. Gallons purchased during most recent twelve months: 28,998

IV. RATE DATA

A. Individual to contact on tariff matters:

1. Name: Marla Kumpf - Utility Manager
2. Telephone Number: (386) 677 5702

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

1. Water:

- | | |
|----------------------|--|
| a. Residential Water | <u>5 / 8" X 3 / 4 " \$9.75 Base & \$2.56 per 1,000 Gal</u> |
| b. General Service | <u>5 / 8" X 3 / 4 " \$9.75 Base & \$2.56 per 1,000 Gal</u> |
| c. Special Contract | _____ |
| d. Other - Specify | _____ |

2. Wastewater:

- | | |
|---------------------------|---|
| a. Residential Wastewater | <u>5 / 8" X 3 / 4 " \$15.89 Base & \$5.78 per 1,000 Gal</u> |
| b. General Service | <u>5 / 8" X 3 / 4 " \$15.89 Base & \$5.78 per 1,000 Gal</u> |
| c. Special Contract | _____ |
| d. Other - Specify | _____ |


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

1. Water Metered	2009	2008
a. Residential	<u>449</u>	<u>449</u>
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
2. Water Unmetered	2009	2008
a. Residential	_____	_____
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
3. Wastewater	2009	2008
a. Residential	<u>420</u>	<u>420</u>
b. General Service	_____	_____
c. Special Contract	_____	_____

d. Other - Specify _____

V. AFFIRMATION

I, Stan Shirah 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 Sec / TRPS _____

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.