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766 NORTH SUN DRIVE **SUITE 4030**

LAKE MARY, FLORIDA 32746

PHONE (407) 830-6331 FAX (407) 830-8522

www.sfflaw.com



December 9, 2013

Mr. Ray Sandrock, Charlotte County Administrator 18500 Murdock Circle Port Charlotte, FL 33948

RE:

Docket No. 130265; Application for a Staff Assisted Rate Case in Charlotte County by

Little Gasparilla Water Utility, Inc.

Our File No.: 35019.04

Dear Mr. Sandrock:

Pursuant to Section 367.091(2), Florida Statutes, enclosed is a copy of Little Gasparilla Water Utility, Inc.'s Application to the Florida Public Service Commission for a Staff Assisted Rate Case.

Should you have any questions regarding the enclosed, please do not hesitate to give me a call.

Very truly yours,

MARTIN S. FRIEDMAN

For the Firm

MSF/ Enclosure

cc:

Jack Boyer (via e-mail)

Commission Clerk (via e-filing)

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DOCKET NO. 130265-WU

FLORIDA PUBLIC SERVICE COMMISSION

13 NOV -4 PM 3: 04

COMMISSION CLERK

1.

APPLICATION FOR A STAFF ASSISTED RATE CASE

	CLERK STAI	FF ASSISTED RATE C	and the	
GEN	NERAL DATA			t and
A.	Name of Utility: LITTLE GASPARILL	A WATER UTILITY, INC.	/ Pan	
В.	Address: P.OBOX 5159, GROVE C	TY, FL 34224	4/1/4/	
			(G)	
	1. Telephone Nos.: (941)681-2778	3		
	2. County: CHAROTTE		Nearest City:	ENGLEWOOD
	General Area Served: LITTLE	GASPARILLA ISLAND		
C.	Authority:			
	Water Certificate No. 802_W D	EP 6080175	Date Received:	8/12/2008
	2. Wastewater Certificate No. N/A		Date Received:	N/A
	3. Date Utility Started Operations:	Water: 1986	Wastewater:	N/A
D.	How System Was Acquired: PURCHA	SED		COM
	If utility was purchased, give date 5/23	/1991	Amount Paid \$	100,000
	Name of Seller: DUGALD MCN	IEILL AND ROBERT HILL		****
	2. Was seller affiliated with present o	wners?	lo	1.86
	3. Did you purchase: X☐ Stock	or assets only		SIN
E.	Type of Legal Entity:			TEL.
	X ☐ Corporation ☐ Partnersh	ip Sole Proprieto	orship	CLK
F.	Ownership & Officers:			
	Name	Title	F	ercent Ownership
	1. DIANE K. BOYER	PRESIDENT	50%	
	2. JACK R. BOYER	VICE PRESIDENT	50%	
	3.	Management of the state of the	Yourself and the second	-
	4.	No. of the state o	Mariano, com some communication	The state of the s

G.	List	of Associated	Companies and Addresses:				
	N/A						
H.	name(s) and address(es):						
	Name: Martin S. Friedman			Address: Sanlando Center 2180 W State Rd 434 Suite 2118 Longwood, FL 3277			
ACC	COUN	TING DATA					
A.	Outs	ide Accountar	nt				
	1.	Name:	ROBERT UNDERWOOD	ALSO: ALEJANDRA	M. JUFFE		
	2.	Firm:	UNDERWOOD & ROBERTS,PLLC 3110 EDWARDS MILL ROAD SUITE 100	JUFFE & FLIS 900 PINE STR ENGLEWOOD	EET #126		
	3.	Address:	RALEIGH, N.C. 27612	2.102211002	.,		
	4.	Telephone:	919-664-8803()	941-475-7937			
B.	Indiv	idual To Cont	act On Accounting Matters:				
	1.	Name:	THERESA CABE				
	2.	Telephone:	(919-664-8803)				
C.	Loca	tion of Books	and Records: 1916 MICHIGAN AV	VE. GROVE CITY, FL 3	4224		
D.	Have	you filed an	Annual Report with the Commission?	X□ Yes □ No			
	Date	Last Filed:	4/25/2013				
E.	Has your latest Regulatory Assessment Fee Payment been made?						
	(January 30 or July 30 whichever is applicable) X Jan 30 July 30						
F.	Basic Rate Base Data: (Most recent two years)						
	1.	Water:			2011 1,421,050	2012 1,421,050	
		Cost of Plan	t In Service	\$	\$ 589,625 1		
		Less Accum	ulated Depreciation	2			
	Less Contributed Plant 512,000 536,000					536,000	

11.

	2.		Owner's Investment	\$	319,425	\$	256,408 2012
			t of Plant In Service	\$	N/A	\$	N/A
			Accumulated Depreciation		N/A	·····	N/A
			s Contributed Plant		N/A		N/A
		Net	Owner's Investment	\$	N/A	\$	N/A
G.	Basi	c Inco	me Statement: (Most recent two years)				
	1.	Wat	er:		2011		2012
		Rev	enues (By Class)				
		a.	WATER REVENUE	\$_	210,959	_ \$	238,834
		b.	IMPACT FEES		13,500		27,000
		C.	OTHER MISC				
		Tota	I Operating Revenues:	\$	224,459	= \$	265,834
		Less	Expenses:				
		a.	Salaries & Wages - Employees		7,119		11,110
		b.	Salaries & Wages - Officers, Directors, & Majority Stockholders		30,447		63,984
		Ċ.	Employee Pensions & Benefits				
		d.	Purchased Water				
		e.	Purchased Power				
		f.	Fuel for Power Production	12			
		g.	Chemicals		3,108		4,122
		h.	Materials & Supplies	-			
		i.	Contractual Services		36,883		25,413
		j.	Rents		2,970		3,510
		k.	Transportation Expenses	194	7,722		7,173
		1.	Insurance Expense		3,928		4,240
		m.	Regulatory Commission Expense		9,303		10,547
		n.	Bad Debt Expense	-			
		Ο.	Miscellaneous Expense	***	55,699		46,852
		p.	Depreciation Expense		37,464		39,017
		q.	Property Taxes		17,815		11,259
		r.	Other Taxes		3,702		6,876
		S.	Income Taxes				

					(5,201)	
		Operating Incom	e (Loss)		\$	\$ <u>4,731</u>
	2.	Wastewater			N/A	
		Revenues (By C	lass):		\$	\$
		a.	in the			
		b.				
		C.				
		Total Operating I	Revenues:		\$	\$
		Less Expenses:				
			Wages - Employees		** *	3 11 8.440
				ectors, & Majority Stockholde	rs	
			Pensions & Benefits		Aprilla America Aprilla Aprill	######################################
			Wastewater Treatme	nt		
		e. Sludge Re	moval Expense			
		f. Purchased	Power			
		g Fuel for Po	ower Production			
		h. Chemicals	•			
		i. Materials &	& Supplies			
		j. Contractua				
		k. Rents			ja 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
		I. Transporta	ation Expenses			***************************************
		m. Insurance	Expense			
		n. Regulatory	Commission Expense	э		
		o. Bad Debt I	Expense		\$00,000 A 500 B 50 B 50 B 50 B 50 B 50 B 50	
		p. Miscellane	ous Expense			
		q. Depreciation	on Expense		***************************************	
		r. Property T	axes			700000000000000000000000000000000000000
		s. Other Taxe	es			William Agent Control of the Control
		t. Income Ta	ixes			
		Operating Incom	e (Loss)		\$	\$
Н.	Outst	tanding Debt:				
		431	Date	Balance	Interest	Expiration
		Creditor	Borrowed	Due	Rate	Date
	1.	I.D.N.	2000	573,775	8%	open
	2.	Bank of the West	12/31/10	15,757	7.49%	12/31/22
	3.	Dougal McNeil	1991	30,000	10%	

I. Indicate Type of Tax Return Field:

BB&T

X Form 1120 -Corporation

1/1/2014

6.75%

56,633

3/27/2011

***************************************			Form 1120S -Subchapter S Corporation Form 1065 - Partnership				
111	ENG	□ INEE	Form 1040 - Schedule C - Individual (Proprietorship) RING DATA				
•	Α.		ide Engineering Consultant:				
		1.	Name: Jay Johnson				
		2.	Firm: DMK				
		3.	Address: 435 Commercial Court, Venice, FL 34292				
		4.	Telephone: (941-412-1293)				
	B.		idual to contact on engineering matters:				
	U.	1.	Name: Jay Johnson				
		2.	Telephone: 941-412-1293()				
	C.	Is th	e utility under citation by the Department of Environmental Protection (DEP) or County Health Department? s, explain: NO				
	D. E.	Nam	any known service deficiencies and steps taken to remedy problems: needs emergency interconnect e of plant operator(s) and DEP operator certificate number(s) held: Kate Dodge #0015226 e utility serving customers outside of its certificated area?				
		If ye	s, explain:				
	G.		dewater:N/A				
		1.	Gallons per day capacity of treatment facilities:				
			a. Existing: b. Under Construction: c. 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 lift stations: 7. How do you measure treatment plant effluent? 8. Is the treatment plant effluent chlorinated?	
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: Number Expiration Date: 12. Total gallons treated during most recent twelve months: 13. Wastewater treatment purchased during most recent twelve months: 14. Water: 15. Gallons per day capacity of treatment facilities: 16. a. Existing: 72,000GPD b. Under Construction: 0 water 17. Type of treatment: Desalination 18. Approximate average daily flow of treated water: 26,600 19. Source of water supply: wells 10. Types of chemicals used and their normal dosage rates: 600 1 cup per day 10. Number of wells in service: 3 10. Total capacity in gallons per minute (gpm): 180 10. Diameter/Depth: 4" / 180' 4" / 180' 6" / Motor horsepower: 3hp 3hp 3hp 3hp 3hp 2mpc capacity (gpm): 60 60 60 10. Reservoirs and/or hydropneumatic tanks: Capacity: 146,000 25,000 300	
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c. Proposed: Interconnect water 2. Type of treatment: Desalination 3. Approximate average daily flow of treated water: 26,600 4. Source of water supply: wells 5. Types of chemicals used and their normal dosage rates: 600 1 cup per day 6. Number of wells in service: 3 Total capacity in gallons per minute (gpm): 180 Diameter/Depth: 4" / 180' 4" / 180' 6" / Motor horsepower: 3hp 3hp 3hp Pump capacity (gpm): 60 60 60 7. Reservoirs and/or hydropneumatic tanks: Description: concrete fiberglass hydropnematic Capacity: 146,000 25,000 300	
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Motor horsepower: Pump capacity (gpm): 60 60 7. Reservoirs and/or hydropneumatic tanks: Description: Capacity: 146,000 3hp 60 60 60 hydropnematic tanks:	
Pump capacity (gpm): 60 60 60 7. Reservoirs and/or hydropneumatic tanks: Description: concrete fiberglass hydropnematic capacity: 146,000 25,000 300	500
7. Reservoirs and/or hydropneumatic tanks: Description: concrete fiberglass hydropnematic tanks: Capacity: 146,000 25,000 300	500'
Description: concrete fiberglass hydropnematic Capacity: 146,000 25,000 300	500'
Capacity: 146,000 25,000 300	500'
8. High service pumping:	
Motor horsepower: 15hp 15hp	
Pump capacity (gpm): 200 200	
How do you measure treatment plant production?	
10. Approximate feet of water mains:	
Size (diameter): 6" 4" 3" 2" & 1"	

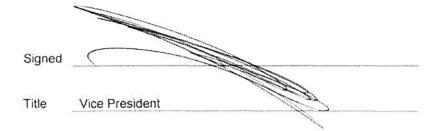
		1				
		Linear feet:	15,000	6,000	4,000	2,000
	11.	Note any fire t	flow requirements and imp	osing government age	ncy: NOT AT TH	IIS TIME
	12.	Number of fire	hydrants in service: 14	4		
	13.	Do you have a	a meter change out progra	m? X No \	'es MPACT	
	14.	Meter installat	ion or tap in fees - Water	\$ FEE (EST @ \$5	9400 1400-7000	
	15.	Service availa	bility fees - Water \$ _4	4,500	**************************************	
	16.	Has the existing	ng treatment facility been a	approved by DEP? [☐ No X☐ Yes	
	17.	Total gallons p	oumped during most recen	t twelve months: 9,0	35,000	
	18.	Total gallons s	sold during most recent two	elve months: 9,035,0	000	
	19.		counted for during most rec		0	
6 <u>6 6</u> 660	20.		ased during most recent to	velve months: 0		
V. RAT	TE DAT					
Α.	Indiv		on tariff matters:			
	1.	Name: Jack	Boyer			
	2.	Telephone Nu	mber: 941-626-8294()		
B.	Sche	dule of present	rates: (Attach additional s	heets if more space is	needed)	
	1.	Water:				
		 Resident 	ial Water	\$4.81/1000 gals		
		b. General	Service	\$49.80/month	4.4.	
		c. Special (Contract	444		
		d. Other - S	Specify			
	2.	Wastewater:				
		 Resident 	ial Wastewater	N/A		
		b. General	Service			
		c. Special (Contract			
		d. Other - S	pecify			
C.	Numl	per of Customer	s: (Most recent two years,)		
	1.	Water Metered	i	2011		2012
		a. Resident	ial	353	-	358
		b. General	Service docks	6		6
		c. Special C	Contract Fire/Sewer	2		2
		d. Other - S	Specify Swimming Pools	2		2
	2.	Water Unmete	red	2011		2012
		a. Resident	ial			
		b. General:	Service			
		c. Special C	Contract			
		d. Other - S	pecify			

3.	Was	stewater		
	a.	Residential		
	b.	General Service		
	C.	Special Contract	***************************************	# A A A A A A A A A A A A A A A A A A A
	d.	Other - Specify		

V. AFFIRMATION

Jack Boyer

I, _____ 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.



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.