Commissioners: Art Graham, Chairman Julie I. Brown Donald J. Polmann Gary F. Clark Andrew Giles Fay

## STATE OF FLORIDA



DIVISION OF ENGINEERING TOM BALLINGER DIRECTOR (850) 413-6910

## Public Service Commission

July 8, 2019

Ms. Debby Blais City of Tavares Civic Center 100 E. Caroline Street Tavares, FL 32778 dblais@tavares.org VIA EMAIL

Re: Docket No. 20190124-WU - Petition for limited alternative rate increase in Lake County by Raintree Waterworks, Inc.

Dear Ms. Blais:

This letter is to confirm our reservation of the Tavares Civic Center for August 7, 2019, from 5:00 p.m. to 11:00 p.m. We are also confirming that there are no charges incurred to use these facilities.

Please find the attached facility reservation form, as well as the Civic Center Set-Up form. If you have any questions, please contact me by phone at (850) 413-6127. Thank you.

Sincerely,

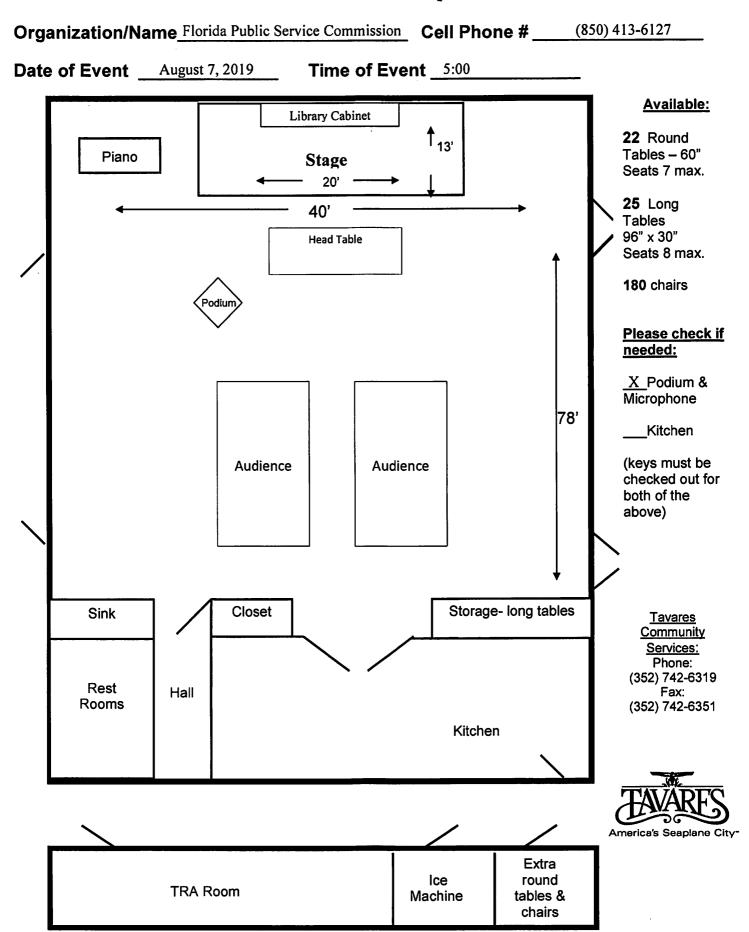
Jefferson Doehling Engineering Specialist Division of Engineering

JD:jp

cc: Office of Commission Clerk (DN 20190124-WU)

## PARKS AND RECREATION FACILITY RESERVATION FORM

Person/Group Jeff Doehling / Public Service Commission	_Date Need	led	August 7, 2	2019	
Address 2540 Schumard Oak Blvd.	Time (From	m)	5:00 pm	(To)	11:00 pm
Tallahassee, FL 32399	Function	Raint	ree Waterw	vorks Custo	omer Meeting
Telephone(850) 413-6127	_ Cell #				
E-mailJDOEHLIN@psc.state.fl.us		Fa	x <u>(850)</u>	413-6128	
Is the reservation for a Non-Profit Organization? Yes					
If yes provide Tax Exempt #					
Please identify which facility you will be renting and the among         X       Civic Center. Kitchen:       Chairs (Quantity Needed):       25       7         TRA Room. Chairs (Quantity Needed):       Tables (Quantity Needed):       Tables (Quantity Needed):         Ingraham Center. Kitchen:       Chairs (Quantity Needed):	Tables (Quantity         ity Needed):        Tables (Quantity)	Needed	): long <u>1</u>	round	
Are there any safety/security precautions required?	: Yes	Х	No		
The more any carety, secondly presented and					
Please Explain: Handicap Access					
I have read and understand all of the rules and regulations governing the back of this page. I Agree to indemnify and save harmless damages, cost, losses and expenses in any manner resulting from, of the use of the above rented premises. Facility keys to be picked at Tavares City Hall. Signature of Representative	the City of Ta arising out of,	or conned to the	rom and aga nected with t	ainst all clai their events,	ims, suites, , as a result
Signature of Representative	Date Signed	1			
Staff Approval	Date Signed	1			
Staff Use O Insurance Required:YesNo Received Date					
Facility Rental: Date Paid Amount Paid \$_	(	Check #	ŧ		
Keys Needed: Civic Center Kitchen Microphone	e TRA	Room	Ing	raham Cen	iter



## **Civic Center Set-Up**