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JS

Dean, Mead, Egerton, Bloodworth, Capouano & Bozarth, P.A.
420 South Orange Avenue, Suite 700
P.O. Box 2346 (ZIP 32802-2346)
Orlando, FL 32801

Attorneys and Counselors at Law
Orlando
Fort Pierce
Tallahassee
Viera/Melbourne

(407) 841-1200
(407) 423-1831 Fax
www.deanmead.com

MARTIN FRIEDMAN
407-310-2077
mfriedman@deanmead.com

October 14, 2020
VIA FEDEX

Adam Tietzman, Commission Clerk
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399-0850

REDACTED

RECEIVED-FPSC
2020 OCT 15 PM 1:03
COMMISSION
CLERK

RE: Docket No. 20200226-WS; Application for certificate to provide wastewater service in Charlotte
County, by Environmental Utilities, LLC.
Our Matter No.: 070276

Dear Mr. Tietzman:

On behalf of Environmental Utilities, LLC, today I have e-filed the following:

- Application for Original Wastewater Certificate with Exhibits.
- Motion to Bifurcate and for Temporary Rule Waiver.

Please forward the enclosed proposed Notice, and the full size maps, to appropriate staff. Also enclosed are the Utility's check in the amount of \$1,500.00 representing the appropriate filing fee, and the Request for Confidential Classification with redacted and highlighted documents.

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

Very truly yours,



MARTIN S. FRIEDMAN
For the Firm

COM _____
 AFD _____
 APA _____
 ECO _____
 ENG 11 Maps _____
 GCL _____
 IDM _____
 CLK _____

MSF/
cc: Jack Boyer (via e-mail)

**NOTICE OF APPLICATION FOR ORIGINAL CERTIFICATE OF
AUTHORIZATION AND INITIAL RATES AND CHARGES
FOR WASTEWATER SERVICE**

Docket No. 20200226-SU - Application for certificate to provide wastewater service in Charlotte County by Environmental Utilities, LLC.

Notice is hereby given on the ____ day of October, 2020, pursuant to Section 367.045, Florida Statutes, and Section 25-30.030, Florida Administrative Code, of the Application for Original Wastewater Certificate in Charlotte County by Environmental Utilities, LLC. The Certificate will authorize Environmental Utilities, LLC. to provide wastewater service in Sections 28, 29, 32 and 33, Township 41 South, Range 20 East, in Sections 3, 4, 10, 15, 16, 21, 22 and 27 in Township 42 South, Range 20 East, which consists of the barrier islands of Little Gasparilla Island, Don Pedro Island, and Knight Island, and in Sections 2, 3, and 11 in Township 42 South, Range 20 East, and Section 34 in Township 41 South, Range 20 East, which consists of Cape Haze on the mainland, all in Charlotte County This legal description has been simplified and to obtain a copy of the exact legal description please contact Martin Friedman at 407-310-2077 or mfriedman@deanmead.com.

Any objections to the Application must be made in writing and filed with the Commission Clerk, Office of Commission Clerk, Florida Public Service Commission, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850, no later than 30 days from the date of this Notice, with a copy to Martin S. Friedman, Esquire, Dean Mead, 420 S. Orange Ave., Suite 700, Orlando, Florida 32801. The objection must state the grounds for the objection with particularity.

Environmental Utilities, LLC.
Post Office Box 7
Placida, Florida 33946
lgwu777@yahoo.com
Phone (941) 626-8294

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

IN RE: Application for certificate to provide
wastewater service in Charlotte County, by
Environmental Utilities, LLC

DOCKET NO. 20200226-WS

REQUEST FOR CONFIDENTIAL CLASSIFICATION

Environmental Utilities, LLC. (“*Applicant*”), by and through its undersigned attorneys and pursuant to Rule 25-22.006(4), Florida Administrative Code (“*FAC*”) and Section 367.156, Florida Statutes, hereby requests confidential classification of certain financial information provided by the Applicant in its Application, and in support shows as follows:

1. Applicant is providing the Financial Statement (“*Confidential information*”) of its owners in support of the financial ability to provide utility service.

2. As a newly-formed entity, the Applicant has no operating history and therefore does not have a basis on which it can independently show its financial ability to provide service as required under Rule 25-30.033(1)(h), FAC. The Applicant is providing the Confidential Information for the specific and limited purposes of satisfying the requirements of Rule 25-30.033(1)(h), FAC, and to enable the Commission to determine the ability of the owners to provide the necessary financial support to the Applicant.

3. The Applicant seeks to have the Confidential Information classified as confidential pursuant to Rule 25-22.006(3), FAC. Although the Commission Staff requires the Confidential Information for the specific and limited purposes set forth in Rule 25-30.033(1)(h), FAC, the Confidential Information should not be made available for inspection and examination by the public under Section 119.07(1), Florida Statutes, for the following reasons:

A. It is not necessary to make the Confidential Information available to the public, and the public will not be harmed in any way by withholding the Confidential Information from public disclosure.

B. The Confidential Information includes personal financial and other information such as personal residence, personal vehicles owned, personal property owned, personal investment, personal indebtedness, etc.

C. The Confidential Information is not intended to be, nor is it, treated by the owners as anything but private and confidential information, and has not been disclosed except pursuant to statutory provision, order of a court or administrative body or private agreement that provides that it will not be released to the public.

D. The Commission has routinely treated the personal financial statements of utility owners submitted to the Commission to support financial ability as confidential.

4. Exhibit "A" to this Request is a "Justification Table" which specifies what information in the Confidential Information the Applicant asks the Commission to classify as confidential and the statutory justification for the request in compliance with Rule 25-22.006(4)(a), (b) and (c), FAC; one highlighted copy and one redacted copy of the Confidential Information.

WHEREFORE, Environmental Utilities, LLC respectfully requests that the Commission determine that the Confidential Information is entitled to confidential treatment pursuant to Section 367.156, Florida Statutes, and Rule 25-22.006, FAC, and exempt the Confidential Information from public inspection and examination.

Respectfully submitted on this 14th day of
October, 2020, by:

Dean Mead
420 S. Orange Ave., Suite 700
Orlando, FL 32801
Telephone: (407) 310-2077
Fax: (407) 423-1831
mfriedman@deanmead.com

/s/Martin S. Friedman
MARTIN S. FRIEDMAN

Exhibit "A"
JUSTIFICATION MATRIX

Location (Document name and location of information)	Justification
<p><u>Financial Statement:</u></p> <p><u>Location:</u> The amounts under all sections</p>	<p>The requested financial information of the owner is not related to any ratemaking function with regard to the Utility.</p> <p>§367.156(3)(e) Disclosure of the compensation data would impair the owner's competitive interests he may acquire other utilities in the future.</p> <p>The financial information relates to the owner in his ownership capacity, and is not information of the Utility.</p> <p>Article I, Section 23 of the Florida Constitution. Disclosure of the information would invade the privacy rights of the owner.</p>



PERSONAL FINANCIAL STATEMENT

Statement as of 8/6/2020

Check applicable box:

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections I and III
- If you are applying for joint credit with another person, complete all Sections, providing information in Section II about the joint applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections, providing information in Section II about the person on whose alimony, support or maintenance payments or income or assets you are relying.

SECTION I - BORROWER INFORMATION				SECTION II - CO-BORROWER / OTHER PARTY INFORMATION			
Name <u>John R Boyer</u>				Name <u>Diane Kay Boyer</u>			
Address <u>9296 LGI</u>				Address <u>9296 LGI</u>			
City <u>Placida</u>		State <u>FL</u>		City <u>Placida</u>		State <u>FL</u>	
Zip Code <u>33946</u>				Zip Code <u>33946</u>			
Social Security No. [REDACTED]		Date of Birth [REDACTED]		Social Security No. [REDACTED]		Date of Birth [REDACTED]	
Position or Occupation <u>VP of LGWU</u>				Position or Occupation <u>Pres. LGWU</u>			
Business Name <u>Little Gasparilla Water Utility</u>				Business Name <u>Little Gasparilla Water Utility</u>			
Business Address <u>P.O. Box 7</u>				Business Address <u>P.O. Box 7</u>			
<u>Placida, FL 33946</u>				<u>Placida, FL 33946</u>			
Business Phone <u>941-681-2778</u> Home Phone [REDACTED]				Business Phone <u>941-681-2778</u> Home Phone [REDACTED]			
Relationship to Section I Individual: <u>Spouse</u>							

SECTION III - STATEMENT OF FINANCIAL CONDITION			
ASSETS		In Dollars (omit cents)	LIABILITIES (include all liabilities as co-maker)
Cash on Hand & in Banks	Schedule A		Notes Due to Banks - Secured
U.S. Gov't and Marketable Securities	Schedule B		Notes Due to Banks - Unsecured
Non-Marketable Securities	Schedule C		Due to Brokers
Real Estate Solely Owned	Schedule D		Real Estate Mortgages Payable
Real Estate Jointly Owned	Schedule E		Accounts Payable to Others
Loans and Accounts Receivable			Accounts and Bill Due
Automobiles			Unpaid Income Taxes Due
Cash Value of Life Insurance	Schedule F		Loans on Life Insurance Policies
IRA's and Vested Retirement Accounts			Other Debt - Itemize
Other Personal Properties			
Other Assets - Itemize			
TOTAL ASSETS			TOTAL LIABILITIES
			NET WORTH
			TOTAL LIABILITIES & NET WORTH

INCOME	CONTINGENT LIABILITIES
Source of income for Year Ended: [REDACTED]	Do you have contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No
(Include other party income if you are applying for joint credit.)	Describe your contingent liabilities below. (Use additional sheet if necessary)
Salary	Amount of liabilities as endorser, co-maker or guarantor?
Bonuses and Commissions	Amount of liabilities on leases or contracts?
Interest and Dividends	Amount of legal claims or judgments against you?
Real Estate Income [REDACTED]	Amount of other special debts?
Business Income	Amount of contested income tax liens?
Other Income - Itemize	Amount of back child support or alimony due?
TOTAL INCOME	TOTAL CONTINGENT LIABILITIES

PERSONAL INFORMATION	
Do you have a will? [REDACTED]	Are you a defendant in any suits, judgments or legal actions? If so, describe: [REDACTED]
If "Yes", the Executor's Name: [REDACTED]	
Number & Age(s) of Dependents (excluding Spouse): [REDACTED]	Are you a partner, member, trustee, officer or owner of any other venture? If so, describe: [REDACTED]
Are you obligated to pay Alimony, Child Support or Separate Maintenance Payments? If so, describe: [REDACTED]	Are any of your tax obligations past due? If so, describe: [REDACTED]
Income tax settled through (date): [REDACTED]	Have you been declared bankruptcy during past 14 years? If so, describe: [REDACTED]
Personal bank account carried at: [REDACTED]	

Please complete all applicable Schedules in Page 2 and sign and date the statement.



Schedule A - CASH IN BANKS AND NOTES DUE TO BANKS

Name of Bank	Type of Account	Type of Ownership	Balances	Loan Balances	Terms & Maturity	Collateral
[REDACTED]						
TOTAL						

Schedule B - U.S. GOVERNMENT & MARKETABLE SECURITIES

Description	No. of Shares	In the Name of	Cost	Market Value	Source of Value	Amount Pledged to
[REDACTED]						

Schedule C - NON-MARKETABLE SECURITIES

Description	No. of Shares	In the Name of	Cost ^{Book}	Market Value	Source of Value	Amount Pledged to
[REDACTED]						
TOTAL						

Schedule D - REAL ESTATE SOLELY OWNED

Property Type & Location	Title in Name of	Date	Cost	Market Value	Mortgage Amount	Monthly Payment	Terms & Maturity
[REDACTED]							
TOTAL							

Schedule E - REAL ESTATE JOINTLY OWNED

Property Type & Location	Title in Name of	Date	Cost	Market Value	Mortgage Amount	Monthly Payment	Terms & Maturity
[REDACTED]							
TOTAL							

Schedule F - LIFE INSURANCE

Name of Insurance Company	Owner	Beneficiary	Face Amount	Policy Loan	Is Policy or C/V	Cash Surrender Value
[REDACTED]						
TOTAL						

For the purpose of procuring credit from time to time, I/we furnish the foregoing as a true and accurate statement of my/our financial condition. Authorization is hereby given to Centennial Bank to inquire in any manner it deems necessary to verify the accuracy of the information contained herein, and to determine my/our creditworthiness, including but not limited to, obtaining a consumer credit report for all parties. The undersigned agrees to notify Centennial Bank immediately in writing of any significant adverse changes in financial condition whether application for further credit is pending or not. In the absence of such written notice it is expressly agreed that in granting new or continuing credit, Centennial Bank may rely on this statement as having the same force and effect as if delivered upon the date additional credit is requested or existing credit extended or continued.

Signature (Borrower)	Signature (Co-Borrower)
Date	Date

Note: Any willful misrepresentation could result in a violation of Federal Law (Sec. 18 U.S.C. 1014)