

COUNTRY WALK UTILITIES, INC.

January 27, 2025

Laurie Hurner
County Administrator
Highlands County BCC
600 S. Commerce Ave.
Sebring, FL 33870

Re: Docket No. 20240168 – WU - Application for Staff Assisted Rate Case (SARC) in Highlands County by Country Walk Utilities, Inc.

Dear Ms. Hurner,

Please find attached Country Walk Utilities, Inc.'s application for a staff assisted rate case (SARC) in Highlands County which was filed with the Florida Public Service Commission.

Pursuant to Section 367.091(2), Florida Statutes,

Upon filing an application for new rates, the utility shall mail a copy of the application to the chief executive officer of the governing body of each county within the service areas included in the rate request. The governing body may petition the commission for leave to intervene in the rate change proceeding, and the commission shall grant intervenor status to any governing body that files a petition.

If you have any questions, please do not hesitate to contact me at (727) 848-8292, ext. 245.

Respectfully Submitted,



Troy Rendell
Vice President
Investor Owned Utilities
// for Country Walk Utilities, Inc.

Cc: Commission Clerk, Florida Public Service Commission

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A STAFF ASSISTED RATE CASE

I. GENERAL DATA

A

Name of Utility: **Country Walk Utility Companies, Inc.**

B

Address: **4939 Cross Bayou Blvd., New Port Richey, FL 34652**

1. Telephone Nos.: **(727) 848- 8292**

2. County: **Highlands**

Nearest City: **Lake Placid, FL**

3. General Area Served: **Country Walk**

C

Authority: **See Order No. PSC-14-0495-PAA-WU, issued September 17, 2014**

1. Water Certificate No. **579-W**

Date Received: **September 17, 2014**

2. Wastewater Certificate No. **N/A**

Date Received: **N/A**

3. Date Utility Started Operations: Water: **1987**

Wastewater: **N/A**

D

How System Was Acquired: **Purchased from Holmes Utilities, Inc.**

If utility was purchased, give date **September 4, 2013**

Amount Paid \$ **\$5,500**

1. Name of Seller: **Holmes Utilities, Inc.**

2. Was seller affiliated with present owners? Yes No

3. Did you purchase: Stock or assets only

E

Type of Legal Entity:

Corporation

Partnership

Sole Proprietorship

F

Ownership & Officers:

	Name	Title	Percent Ownership
1.	Gary Deremer	President	100%
2.			
3.			
4.			

G
. List of Associated Companies and Addresses:

U.S. Water Services Corporation
4939 Cross Bayou Blvd.
New Port Richey, FL 34652

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):

Name: **Troy Rendell, U.S. Water Services Corporation** Address: **4939 Cross Bayou Blvd.**
New Port Richey, FL 34652

II
. **ACCOUNTING DATA**

A
. Outside Accountant

1. Name: **Larry Schalles**
2. Firm: **Schalles and Associates**
3. Address: **5320 Main St., New Port Richey, FL 34652**
4. Telephone: **(727) 847-2277**

B
. Individual To Contact On Accounting Matters:

1. Name: **Troy Rendell, Vice President, U.S. Water Services Corp.**
2. Telephone: **(727) 848- 8292 ext. 245**

C
. Location of Books and Records: **4939 Cross Bayou Blvd., New Port Richey, FL 34652**

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

Date Last Filed: **2023**

E
. Has your latest Regulatory Assessment Fee Payment been made?
(January 30 or July 30 whichever is applicable) Jan 30 July 30

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

	<u>Year Ending</u> <u>12/31/2023</u>	<u>Proposed</u> <u>Test Year</u> <u>10/31/2024</u>
1. <u>Water:</u>		
Cost of Plant In Service	<u>\$256,449</u>	<u>\$ 259,236</u>
Less Accumulated Depreciation	<u>(111,698)</u>	<u>(120,685)</u>
Less Contributed Plant	<u>(24,200)</u>	<u>(24,200)</u>
Plus Accumulated Amortization – CIAC	<u>24,200</u>	<u>24,200</u>
Net Owner's Investment	\$ 144,751	\$138,551

	<u>Year Ending</u> <u>12/31/2023</u>	<u>Proposed</u> <u>Test Year</u>
2. <u>Wastewater:</u>		
Cost of Plant In Service	N/A	N/A
Less Accumulated Depreciation		
Less Contributed Plant		
Plus Accumulated Amotrization - CIAC		
Net Owner's Investment	\$	

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

	<u>Year Ending</u> <u>12/31/2023</u>	<u>Proposed</u> <u>Test Year</u> <u>10/31/2024</u>
1. <u>Water:</u>		
Revenues (By Class)		
a. Residential	\$ 61,574	\$57,524
b. Commercial	722	552
c. Other	908	976
Total Operating Revenues:	\$ 63,204	\$ 59,052
Less Expenses:		
a. Salaries & Wages - Employees	0	0
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	2,750	2,750
c. Employee Pensions & Benefits	0	0
d. Purchased Water	0	0
e. Purchased Power	1,412	1,187
f. Fuel for Power Production	0	0
g. Chemicals	1,775	2,329
h. Contractual Services – Testing	0	905
i. Contractual Services - Professional	27,152	28,097
j. Contractual Services - Legal	300	300
k. Contractual Services – Accounting	500	525
l. Materials and Supplies	0	0
m. Rental of Real Estate	0	0
n. Office Supplies	0	0
o. Insurance Expense	1,564	1,630
p. Regulatory Commission Expense	250	250
q. Bad Debt Expense	97	226
r. Miscellaneous Expense	250	250

	Creditor	Date Borrowed	Balance Due	Interest Rate	Expiration Date
1.	N/A				
2.					
3.					
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: **N/A**
- 2. Firm:
- 3. Address:
- 4. Telephone: ()

B. Individual to contact on engineering matters:

- 1. Name: **Troy Rendell, Manager of Regulated Utilities, U.S. Water Service Corp.**
- 2. Telephone: **(727) 848- 8292 ext. 245**

C. Is the utility under citation by the Department of Environmental Protection (DEP) or County Health Department?

Yes

If yes, explain: **Maximum Contaminant Level (MCL) violations for TTHMS and HAA5S based upon rolling annual average**

D. List any known service deficiencies and steps taken to remedy problems: **Country Walk installed forced draft aeration treatment for hydrogen sulfide removal from the well. Country Walk Utilities has completed the approved construction as of September 29, 2017 to ultimately reduce the levels of TTHMs and HAA5s to meet Standards.**

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

Sharon Purviance - U.S. Water Services Corporation

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: **N/A**
 - b. Under Construction: **N/A**
 - c. Proposed: **N/A**
- 2. Type and make of present treatment facilities: **N/A**

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? Yes No

If yes, what is the normal dosage rate?

9. Tap in fees – Wastewater: \$ 0

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:

H. Water: PWS ID No. 628-4114

1. Gallons per day capacity of treatment facilities:

a. Existing: **106,000**

b. Under Construction : **n/a**

c. Proposed: **n/a**

2. Type of treatment: **Disinfection and Forced Draft Aeration**

3. Approximate average daily flow of treated water: **6,184 gpd**

4. Source of water supply: Ground Water

5. Types of chemicals used and their normal dosage rates: **Sodium Hypochlorite/Sulfuric Acid**

6. Number of wells in service: 1

Total capacity in gallons per minute (gpm): gpm

Diameter/Depth:	5" / 483		
Motor horsepower:	5		
Pump capacity (gpm):	80		

7. Reservoirs and/or hydropneumatic tanks:

Description:	Hydro Pneumatic	Ground	
Capacity:	5,000	5,000	

8. High service pumping:

Motor horsepower:	3 hsp			
Pump capacity (gpm):				

9. How do you measure treatment plant production? Well Meter

10. Approximate feet of water mains:

Size (diameter):	2"	4"		
Linear feet:	3,815 lf	1,802		

11. Note any fire flow requirements and imposing government agency: Highlands County
750 gpm

12. Number of fire hydrants in service: 0 - N/A

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 \$ 150.00

16. Has the existing treatment facility been approved by DEP? No Yes

17. Total gallons pumped during most recent twelve months: 2,257,000

18. Total gallons sold during most recent twelve months: 1,977,000

19. Gallons unaccounted for during most recent twelve months: (71,200) = -3.14%

20. Gallons purchased during most recent twelve months: N/A

IV. RATE DATA

A. Individual to contact on tariff matters:

1. Name: Troy Rendell
2. Telephone Number: (727) 848- 8292 ext. 245

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

1. Water:

a. Residential Water	BFC - \$33.05 Gallonge Charge - 0 - 3,000 - \$14.81 Over 3,000 - \$26.92
b. General Service	BFC - \$33.05 Gallonge Charge - \$17.22
c. Special Contract	_____
d. Other - Specify	_____

2. Wastewater:

a. Residential Wastewater	_____
b. General Service	_____
c. Special Contract	_____
d. Other - Specify	_____

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

1. Water Metered	<u>2023</u>	<u>Test Year</u>
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a. Residential	<u>70</u>	<u>69</u>
b. General Service	<u>1</u>	<u>1</u>
c. Special Contract	<u>0</u>	
d. Other - Specify	<u>0</u>	
2. Water Unmetered	<u>2023</u>	<u>Test Year</u>
a. Residential	<u>0</u>	
b. General Service	<u>0</u>	
c. Special Contract	<u>0</u>	
d. Other - Specify	<u>0</u>	
3. Wastewater	<u>2023</u>	<u>Test Year</u>
a. Residential		
b. General Service		
c. Special Contract		
d. Other - Specify		

V. AFFIRMATION

I, **Troy Rendell** 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 Vice President

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.