

**SUNDSTROM
& MINDLIN, LLP**
Attorneys | Counselors



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February 3, 2025

Mr. Adam Teitzman, Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

Re: NC Real Estate Projects, LLC dba Grenelefe Resort Utility, Inc.
Application for Staff Assisted Rate Case
Docket No. 20250023-WS

Dear Mr. Teitzman,

Attached for filing, please find my Affidavit stating that I provided the enclosed letter and SARC application to Bill Beasley, Manager of Polk County, in accordance with the requirements of Section 367.091(2), Florida Statutes.

If you need any further information or have any questions, please do not hesitate to contact me.

Sincerely,

SUNDSTROM & MINDLIN, LLP

F. Marshall Deterding

F. Marshall Deterding
Of Counsel

FMD/brf

Enclosures

AFFIDAVIT

STATE OF FLORIDA

COUNTY OF LEON

Before me, the undersigned authority, authorized to administer oaths and take acknowledgements, personally appeared F. Marshall Deterding, who, after being duly sworn on oath, did depose on oath and say that he is the attorney for NC Real Estate d/b/a Grenelefe Utility and that on February 3, 2025, he did send by email the attached letter to Bill Beasley in accordance with the requirements of Section 367.091(2), Florida Statutes.

FURTHER AFFIANT SAYETH NAUGHT.



F. Marshall Deterding

Sworn to and subscribed before me
This 3rd day of February, 2025.



NOTARY PUBLIC

My Commission Expires:



2548 BLAIRSTONE PINES DRIVE
TALLAHASSEE, FLORIDA 32301

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February 3, 2025

Mr. Bill Beasley
Polk County Manager
BillBeasley@polk-county.net

Re: NC Real Estate Projects, LLC d/b/a Grenelefe Resort Utility, Inc.
Docket No. 20250023-WS Application for Staff Assisted Rate Case

Dear Mr. Beasley,

Please find attached the Staff Assisted Rate Case Application for an increase in water and wastewater rates in Polk County filed on behalf of NCRE d/b/a Grenelefe Resort Utility, Inc. 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 mdeterding@sfflaw.com

Sincerely,

SUNDSTROM & MINDLIN, LLP

F. Marshall Deterding
Of Counsel

FMD/brf

Enclosures

cc: Mr. Adam Teitzman, FPSC Clerk

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

I. GENERAL DATA

A. Name of Utility: **North Carolina Real Estate Projects LLC d/b/a Grenelefe Utility**

B. Address: **3425 Turnberry Dr. Lakeland FL 33803**

1. Telephone Nos.: **(863) 422 7511 utility office**

2. County: **Polk**

Nearest City: **Haines City**

3. General Area Served: **Haines City**

C. Authority:

1. Water Certificate No. **589**

Date Received: **7/8/2024**

2. Wastewater Certificate No. **507**

Date Received: **7/8/2024**

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

Wastewater:

D. How System Was Acquired: **Purchased**

If utility was purchased, give date **May31, 2022**

Amount Paid \$ **2.5 million**

1. Name of Seller: **Greenlefe Resort Utility Inc.**

2. Was seller affiliated with present owners? **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.	<u>Fredrick Scott House</u>	<u>Member Manger</u>	<u>100</u>
2.	<u>Jason Cox</u>	<u>Controller</u>	<u></u>
3.	<u></u>	<u></u>	<u></u>
4.	<u></u>	<u></u>	<u></u>

G. List of Associated Companies and Addresses:

Smokey Groves Development LLC
Ronin Assets LLC

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:

Address:

Marshal F Deterding Esq.
Gary S Morse

2548 Blairstone Pines Dr. Tallahassee 32301
44 Black Willow St. Homosassa Fl 34446

II. ACCOUNTING DATA

A. Outside Accountant

1. Name:
2. Firm:
3. Address:
4. Telephone: ()

B. Individual To Contact On Accounting Matters:

1. Name: **Jason Cox Controller**
2. Telephone: **(704) 996 4543**

C. Location of Books and Records: **110 Wades Way Unit 314 Mooresville North Carolina 28117**

D. Have you filed an Annual Report with the Commission? Yes

Date Last Filed: **March 2024**

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)

1. <u>Water:</u>	2023	12 Mo. Ended 10/2024
Cost of Plant In Service	\$ <u>3,067,833</u>	\$ <u>3,067,833</u>
Less Accumulated Depreciation	<u>2,670,608</u>	<u>2,735,323</u>
Less Contributed Plant	<u>331,958</u>	<u>293,772</u>
Net Owner's Investment	\$ 65,267	\$ 38,738

	2023	12 Mo. Ended 10/2024
2. <u>Wastewater:</u>		
Cost of Plant In Service	\$ 3,108,895	\$ 3,277,805
Less Accumulated Depreciation	<u>2,737,951</u>	<u>2,802,666</u>
Less Contributed Plant	<u>311,267</u>	<u>292,780</u>
Net Owner's Investment	<u>\$ 59,677</u>	<u>\$ 182,359</u>
G. Basic Income Statement: <i>(Most recent two years)</i>		
1. <u>Water:</u>	2023	2024
Revenues (By Class)		
a. Residential	\$ 64,123	\$ 359,309
b. Commercial	<u>5733</u>	
c. Irrigation	<u>6347</u>	
	<u>188,711</u>	
Total Operating Revenues:	<u>\$ 264,914</u>	<u>\$ 359,309</u>
Less Expenses:		
a. Salaries & Wages – Employees		
b. Salaries & Wages - Officers, Directors, & Majority Stockholders		
c. Employee Pensions & Benefits		
d. Purchased Water		
e. Purchased Power	<u>70,972</u>	<u>38,363</u>
f. Fuel for Power Production		
g. Chemicals	<u>25,587</u>	<u>20,101</u>
h. Materials & Supplies	<u>4,201</u>	
i. Contractual Services	<u>291,012</u>	<u>359,238</u>
j. Rents		
k. Transportation Expenses		
l. Insurance Expense		<u>3,529</u>
m. Regulatory Commission Expense		
n. Bad Debt Expense		
o. Miscellaneous Expense	<u>13,175</u>	
p. Depreciation Expense	<u>77,658</u>	<u>64,715</u>
q. Property Taxes	<u>4,931</u>	<u>3,207</u>
r. Other Taxes(RAF)	<u>5,218</u>	<u>7,303</u>
s. Income Taxes		
Operating Income (Loss)	<u>\$ <227,840></u>	<u>\$ <137,147></u>

	2023	12 Mo. Ended 10/2024
2. <u>Wastewater</u>		
Revenues (By Class):	\$	\$
a. Residential	86,950	225,428
b. Commercial	7,774	
c. Multi Family	8,606	
Total Operating Revenues:	<u>\$ 103,330</u>	<u>\$ 225,428</u>
Less Expenses:		
a. Salaries & Wages – Employees		
b. Salaries & Wages - Officers, Directors, & Majority Stockholders		
c. Employee Pensions & Benefits		
d. Purchased Wastewater Treatment		
e. Sludge Removal Expense	78,425	90,677
f. Purchased Power	30,416	59,049
g. Fuel for Power Production		
h. Chemicals	6,397	8,377
i. Materials & Supplies	4,201	
j. Contractual Services	170,439	390,400
k. Rents		
l. Transportation Expenses		
m. Insurance Expense	2,050	3,529
n. Regulatory Commission Expense	750	
o. Bad Debt Expense		
p. Miscellaneous Expense	12,425	
q. Depreciation Expense	42,524	35,437
r. Property Taxes	5,132	3,207
s. Other Taxes(RAF)	6,705	5,150
t. Income Taxes		
Operating Income (Loss)	<u>\$ <256,134></u>	<u>\$ <370,398></u>

H. Outstanding Debt:

	Creditor	Date Borrowed	Balance Due	Interest Rate	Expiration Date
1.	<u>Prime Meridian</u>	<u>Feb 2024</u>	<u>2 Million</u>	<u>Line of Credit</u>	
2.					
3.					
4.					

I. Indicate Type of Tax Return Filed:

- 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: **George McDonald**
- 2. Firm: **McDonald Group International Inc.**
- 3. Address: **9030 South Brittany Path, Inverness, FL 34452**
- 4. Telephone: **(352) 637 1652**

B. Individual to contact on engineering matters:

- 1. Name:
- 2. Telephone: ()

C. Is the utility under citation by the Department of Environmental Protection (DEP) or County Health Department? If yes, explain: **Required wastewater plant upgrades to meet new treatment standards. See attached narrative for description of these FDEP requirements.**

D. List any known service deficiencies and steps taken to remedy problems: **None Currently**

E. Name of plant operator(s) and DEP operator certificate number(s) held: **Ben Tech LLC
Keith Burge-Operator**

F. Is the utility serving customers outside of its certificated area? **Yes**
If yes, explain: **Certificate modification underway at FPSC**

G. Wastewater:

- 1. Gallons per day capacity of treatment facilities:
 - a. Existing: **.340 MGD**
 - b. Under Construction:
 - c. Proposed:

2. Type and make of present treatment facilities: **Extended Aeration**

3. Approximate average daily flow of treatment plant effluent: **150,000 GPD**

4. Approximate length of wastewater mains:

Size (diameter):					
Linear feet:					

5. Number of manholes: **Unknown**

6. Number of lift stations: **5**

7. How do you measure treatment plant effluent? **Flow Meter**

8. Is the treatment plant effluent chlorinated? **Yes**

If yes, what is the normal dosage rate?

- 9. Tap in fees – Wastewater: \$ **Actual Cost**
- 10. Service availability fees – Wastewater: \$
- 11. Note DEP Treatment Plant Certificate Number and date of expiration: **FLA013016**
Number Expiration Date: **November 15, 2027**
- 12. Total gallons treated during most recent twelve months: **50.581 MG for 2023**
- 13. Wastewater treatment purchased during most recent twelve months: **N/A**

H. Water:

- 1. Gallons per day capacity of treatment facilities:
 - a. Existing: **2.16 MGD**
 - b. Under Construction :
 - c. Proposed:
- 2. Type of treatment: **Disinfection and Corrosion Control per last Sanitary Survey**
- 3. Approximate average daily flow of treated water: **198,927 GPD per last Sanitary Survey**
- 4. Source of water supply: **2 wells**
- 5. Types of chemicals used and their normal dosage rates: **Liquid Chlorine 30 GPD**

- 6. Number of wells in service: **2**
Total capacity in gallons per minute (gpm): **3,000 GPM**

Diameter/Depth:	12" / 1,440Ft	8" / 904Ft	
Motor horsepower:	125 HP	125 HP	
Pump capacity (gpm):	1,500GPM	1,500	

- 7. Reservoirs and/or hydropneumatic tanks:

Description:	Hydro		
Capacity:	25,000 Gallons		

- 8. High service pumping:

Motor horsepower:				
Pump capacity (gpm):				

- 9. How do you measure treatment plant production? **Signet electronic meter**

- 10. Approximate feet of water mains:

Size (diameter):	6"-10"			
Linear feet:	Unknown			

- 11. Note any fire flow requirements and imposing government agency: **750 GPM**

- 12. Number of fire hydrants in service: **75**

- 13. Do you have a meter change out program? No Yes
- 14. Meter installation or tap in fees - Water \$ 600
- 15. Service availability fees - Water \$ _____
- 16. Has the existing treatment facility been approved by DEP? No Yes
- 17. Total gallons pumped during most recent twelve months: 116.55 MG
- 18. Total gallons sold during most recent twelve months: 49.7 MG
- 19. Gallons unaccounted for during most recent twelve months: 66.85 MG
- 20. Gallons purchased during most recent twelve months: N/A

IV. RATE DATA

A. Individual to contact on tariff matters:

- 1. Name: Marshall F Deterding
- 2. Telephone Number: (850) 877 6555

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

1. Water:

- a. Residential Water See Attached Tariff Sheets
- b. General Service _____
- c. Special Contract _____
- d. Other - Specify _____

2. Wastewater:

- a. Residential Wastewater See Attached Tariff Sheets
- b. General Service _____
- c. Special Contract _____
- d. Other - Specify _____

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

	2023	12 Mo. Ended 10/2024
1. Water Metered	2023	12 Mo. Ended 10/2024
a. Residential	<u>1,608</u>	<u>1,608</u>
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
2. Water Unmetered	20	20
a. Residential	_____	_____
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
3. Wastewater	2023	12 Mo. Ended 10/2024
a. Residential	<u>1,357</u>	<u>1,357</u>
b. General Service	_____	_____

c. Special Contract

d. Other - Specify

V. AFFIRMATION

Jason Cox Controller

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.

Signed

Jason Cox

Title

Controller
NC Real Estate Projects, LLC

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.