# Heartland Utilities, Inc. 

P. O. Box 1991

Sebring, Florida 33871

April 16, 1996

## RECEIVED

APR 181996

Mr. Charles Hill, Director Division of Water and Wastewater Florida Public Service Commission 2540 Shumard Oak Blvd.

$$
960517-\omega u
$$ Tallahassee, F1 32399-0870

> Re: Heartland Utilities $420-W$ SARC

Dear Mr. Hill:
Please find enclosed an application for a staff assisted rate case.

I am requesting that Stan Reiger be assigned the engineer since he is familiar with our system and operations and has worked with us previously.

Thank you,

$\mathrm{HS} / \mathrm{CS}$

# FILE NO: WS-96-0068 FILE REC'D: 04/18/96 DOCKET NO: N/A 

SYSTEM CODE :
COMPANY NAME: HEARTLAND UTILITIES
FILING ASSIGN TO: BUR. SAB OPR. OTC. ATTY.
TYPE: SARC DESCRIPTION: APPLICATION FOR A STAFF ASSISTED RATE CASE.

OFCL. FILING: 04/18/96
ACTION: $G$
HEARING DATE: / /
RECOMMENDATION DATE: / /
AGENDA DATE: / /
ANTICIPATED BFFECTIVE DATE; $06 / 17 / 96$
PINAL EFFECTIVE DATE: / / ORDER NUMBER:
FILE CLOSE DATE: $/ /$ LOCATION: A STATUS: 0

FLORIDA PUBLIC SERVICE COMMISSION
APPLICATION FOR A
$960517-$ w STAFF ASSISTED RATE CASE
I. General Data
A. Name of utility HEARTLAND UTULITLES, INC,
B. Address P.O. Box 1991

Sebring, F1 33871

1. Telephone Nos. (941 655-4300 or (941) 385-5977
2. County Highlands Nearest city Sebring
3. General area served Sebring Country Estates and DeSoto city
C. Authority:
4. Water Certificate No. 420-W Date received 1989
5. Sewer Certificate No. _- Date received __ _ _-
6. Date utility started operations: Water Unknown Sewer $\qquad$
D. How system was acquired $\qquad$
If utility was purchased, give date 1989 Amount Paid 115,000
7. Name of Seller Ruth McGrath
8. Was seller affiliated with present owners? No
9. Did you purchase: Stock $\qquad$ or assets only $\qquad$
E. Type of legal entity: Corporation, Partnership or Sole Proprietorship Corporation
F. Ownership \& officers:

G. List of Assocel Companies and Addresses:
10. $\qquad$
11. $\qquad$
12. $\qquad$
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):

N/A

$\qquad$
II. Accounting Data
A. Outside Accountant

1. Name Dan Dorrell
2. Firm Dorre11 and Hancock
3. Address 435 South Commerce Avenue, Sebring
4. Telephone (941) 385-1577
B. Individual to contact on accounting matters:
5. Name

Dan Dorrell
2. Telephone (941) 385-1577
c. Location of books and records Dorrell's office
D. Have you filed an Annual Report with the Commission? Yes

Date last filed 3-31-96
E. Has your latest semiannual regulatory assessment fee payment been made (January 30 or July 30 whichever is applicable)? Yes
F. Basic Rate Base Data (Most recent two years)

## 1. Water

Cost of Plant In Service:
Less Accumulated Depreciation:
Less Contributed Plant:
Net Orner's Investment:

$$
1995
$$

$$
1994
$$

$$
\$ 1,092,557 \$ 1,050,316
$$

$$
362,359
$$

$$
327,466
$$

$$
454,092
$$

$$
420,986
$$

$$
\$ \quad 276,106 \$ 301,864
$$

2. Sewer $N / A$

Cost of Plant In Service:
Less Accumulated Depreciation:
Less Contributed Plant:
Net Owner's Investment:
\$
$\$$
19
19 $\qquad$
$\$$ $\qquad$

 -
$\$$
G. Basic Income Statement (Most recent two years):

1. Water

Revenues (By Class):
a. Residential
b.
c.

Total Operating Revenues:
Less Expenses:
a. Salaries $\&$ Wages - Employees
$\$ 17,220 \quad \$ \quad 6,413$
b. Salaries \& Wages - Officers, Directors, \& Majority Stockholders
c. Employee Pensions \& Benefits
d. Purchased Water
e. Purchased Power
f. Fuel for Power Production
g. Chemicals
h. Materials \& Supplies
i. Contractual Services

1. Rents
k. Transportation Expenses
2. Insurance Expense
m. Regulatory Comaission Expense
n. Bad Debt Expense
o. Miscellaneous Expense
p. Depreciation Expense
q. Property Taxes
r. Other Taxes
s. Income Taxes

Operating Income (Loss)
1995
1994


6,413

$34,893 \quad 31,763$

| $\frac{4,380}{2,816}$ | $\frac{2,921}{18,840}$ |
| ---: | ---: |
| $(43,727)$ | 9,711 |

2. Sewer

Revenues (By Class):
$\mathrm{N} / \mathrm{A}$
19
a.
b.
c.

Total Operating Revenues:
$\$$ $\qquad$

$\$$

§ $\qquad$
$\qquad$
$\$$
Less Expenses:
a. Salaries \& Wages - Employees
b. Salaries \& Wages - Officers, Directors, \& Majority Stockholders
c. Employee Pensions \& Benefits
d. Purchased Sewage Treatment
e. Sludge Removal Expense
f. Purchased Power
g. Fuel for Power Production
h. Chemicals

1. Materials \& Supplies
j. Contractual, Services
k. Rents
2. Transportation Expenses
m. Insurance Expense
n. Regulatory Commission Expense
o. Bad Debt Expense
p. Miscellaneous Expense
q. Depreciation Expense
r. Property Taxea
s. Other Taxes
t. Income Taxes

Operating Income (Loss)
$\$$
\$ $\qquad$


$\xrightarrow{\square}$ $\qquad$
$\$$

H. Outstanding Debt:

I. Indicate Type of Tax Return Filed:

| X |
| ---: |
| $\square$ |

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Form 1120 - Corporation
    Form 1120S - Subchapter S Corporation
    Form 1065 - Partnership
    Form 1040 . Schedule C - Individual (Proprietorship)
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## III: Engineering Dat:

A. Outside Engineering Consultant:

1. Name $\qquad$
None under Contract
2. Firm $\qquad$
3. Address $\qquad$
4. Telephone $\square$ )
B. Individual to contact on engineering matters:
5. Name
6. Telephone ( $\quad$ )
C. Is the utility under citation by the Department of Environmental Regulation (DER) or county health department? If yes, explain. No
D. List any known service deficiencies and steps taken to remedy problems. None
E. Name of plant operator (s) and DER operator certificate number (s) held. Howard Short A-3304
F. Is the utility serving customers outside of its certificated area? No If yes, explain. $\qquad$
G. Wastewater: $N / A$
7. Gallons per day capacity of treatment facilities existing under construction proposed $\qquad$
8. Type and make of present treatment facilities $\qquad$
9. Approximate average daily flow of treatment plant effluent $\qquad$
10. Approximate length of sewer mains:
$\qquad$ Linear feet $\square$
$\square$
$\qquad$
11. Number of manholes $\qquad$
12. slumber of liftstations $\qquad$
13. How do you measure treatment plant effluent? $\qquad$
14. Is the treatment plant effluent chlorinated? $\qquad$ If yes, what is the normal dosage rate?
15. Tap in fees - Sewer \$ $\qquad$
16. Service availability fees - Sewer \$ $\qquad$
17. Note DER Treatment Plant Certificate Number and date of expiration: Number Expiration Date $\qquad$
18. Total gallons treated during most recent twelve months $\qquad$
19. Sewage treatment purchased during most recent twelve months $\qquad$
H. Water
20. Gallons per day capacity of treatment facilities existing 400,000 GPD under construction $\qquad$ proposed $\qquad$
21. Type of treatment Aeration. Chlorination
22. Approximate average daily flow of treated water 167,000 GPD
23. Source of water supply $\qquad$
24. Types of chemicals used and their normal dosage rates $\qquad$ Chiorine, $12 \mathrm{mg} / 1$ and $6 \mathrm{mg} / 1$
25. Number of wells in service 3 Total capacity in gallons per minute (gpm) 900

| Diameter/Depth | $12 \% / 1200$ | $8=1500$ | $B^{n} 11500$ |
| :---: | :---: | :---: | :---: |
| Motor horsepower | 20 | 10 | 10 |
| Pump capacity (g) | 300 | 300 | 300 |

7. Reservoirs and/or hydropneumatic tanks:

| Description | Steel | Steel | Steel |
| :---: | :---: | :---: | :---: |
| Capacity | 11.000 | 10.000 | 10,000 |

8. High service pumping:
Pump capacity (gpm) $\qquad$ $\frac{15}{300}$ $\square$ $\qquad$
9. How do you measure treatment plant production? Meter
10. Approximate feet of water mains:

$$
\begin{aligned}
& \text { Size (diameter) } \frac{6 n}{15850} \frac{4 n}{37595} \frac{2 n}{10675} \frac{3^{n}}{3000} \\
& \text { Linear feet }
\end{aligned}
$$

11. Note any fire flow requirements and fmposing government agency Hiahlands County 500 GPM
12. Number of fire hydrants in service 4
13. Do you have a meter change out program? Yes
14. Meter installation or tap in fees . Water $\$ 500$
15. Service availability fees - Water \$ 0
16. Has the existing treatment facility been approved by DER? Yes
17. Total gallons pumped during most recent twelve months $61,018,000$
18. Total gallons sold during most recent twelve months $46,198,000$
19. Gallons unaccounted for during most recent twelve months $14,820,000$
20. Gallons purchased during most recent twelve months $\qquad$

## IV. Rate Data

A. Individual to contact on tariff mattors:

1. Same $\qquad$ Howard Short
2. Telephone Number (94) 655-4300 or 941-385-5977
B. Schedule of present rates (Attach additional sheet if more space is needed) :
3. Water:
a. Residential Water
b. General Service
c. Special Contract
d. Other
4. Sewer:
a. Residential Sewer
b. General Service
c. Special Contract
d. Other
attached tariff sheets

| $\square$ |
| :--- |

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

1. Water Metered
a. Residential
b. General Service
c. Special Contract
d. Other - specify Commercial
2. Water Unmetered
a. Residential
b. General Service
c. Special Contract
d. Other - specify
3. Sewer NA
a. Residential
b. General Service
c. Special Contract
d. Other - specify
19.95

1994


19 $\qquad$
-
$\times 1$

## $\checkmark$ Affirmation

I. $\qquad$ 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


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.



| NAME OF COMPANY | HEARTLAND UTILITIES, INC, |
| :--- | :--- |
| WATER TARIFF |  |
|  | MULTI-RESIDENTIAL SERVICE |
| RATE SCHEDULE MS |  |

