

Lakefront Leisure Living _

99 MAR 18 71 8 15 FLATE NOTE AT

March 15,1999

990356-WS

State Of Florida
Public Service Commission
Mr.or Mrs. Blanca S. Bayo Director
Division of Records and Reporting
2540 Shumard Blvd.
Tallahassee, Fl. 32301-0870

Dear Sir or Madam;

This my application for a Staff Assisted Rate Case, For Breeze Hill Utilities I have fill this out to the very best of my knowledge, I hope its to your satisfaction.

Sincerely,

Paul E. Bieber

Breeze Hill Utilities

03568-99 3/18/99

152 Breeze Hill Lake Wales, Florida 33853 — Phone: (941) 696-1666

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A STAFF ASSISTED RATE CASE

I.	General Data						
	A.	Name of utility BREEZE HILL UTILITIES					
	в.	Address /52 BREEZE HILL					
		LAKE WALES FL 33853					
		1. Telephone Nos. (94) 696-1666					
		2. County POLK Nearest city LAKE WALES					
		3. General area served BREEZE HILL SUB-DIVISION					
		WALK-IN-THE-WATER ROAD					
	c.	Authority:					
		1. Water Certificate No. <u>598-W</u> Date received <u>AEB 3,189</u> ?					
		2. Sewer Certificate No. <u>5/3-5</u> Date received FFB 3,1999					
		3. Date utility started operations: Water 1976 Sewer 1976					
	D.	How system was acquired PURCLASED					
		If utility was purchased, give date 6-13-97 Amount Paid 74,000.00					
		1. Name of Seller WALK-IN-THE-WATER VILLAGE ASSOCIATES LTD					
		2. Was seller affiliated with present owners?					
		3. Did you purchase: Stock or assets only					
	Ε.	Type of legal entity: Corporation, Partnership or Sole					
		Proprietorship BIEBER ENTERPRISES NO					
	F.	Ownership & Officers:					
		Name Title Ownership					
		1. PAUL E. BIEBER PRESIDENT 100 PERCENT					
		3. 4.					
PSC,	/WAS	2 (Rev. 11/86) List of Associated Companies and Addresses:					
		1					
		2.					
		3					
	н.	If you have retained an attorney and/or a consultant to represent the					
		utility for this application, furnish the name(s) and address(es):					

		NO
II.	Acc	ounting Data
	Α.	Outside Accountant
		1. Name
		2. Firm
		3. Address
		4. Telephone ()
	в.	Individual to contact on accounting matters:
		1. Name PAUL E. BIEBER
		2. Telephone (941) 696-1666
	c.	Location of books and records [52 BREEZE HILL LAKE WALES, FL
	D.	Have you filed an Annual Report with the Commission? YES
		Date last filed MAR, 28, 1998
	Ε.	Has your latest semiannual regulatory assessment fee payment been made (January 30 or July 30 whichever is applicable)?
	F.	Basic Rate Base Data (Most recent two years)
		1. Water 19 97 19 97
		Cost of Plant In Service: \$ 125,000.00 \$ 126,000.00
		Less Accumulated Depreciation: 4852
		Less Contributed Plant:
		Net Owner's Investment: \$ 34,000.00 \$

	2.	Sewer		19 <u>97</u>	19 98
		Cost of Plant In Service:	\$	175,000.00	\$ 175,000.00
		Less Accumulated Depreciation:			
		Less Contributed Plant:			
		Net Owner's Investment:	\$	45,0000	\$ 45,000.00
G.	Bas	ic Income Statement (Most recent two y	ears):	
	1.	Water		19 97	19 28
		Revenues (By Class): a b	\$	8.778.00	\$ <u>14,784.6</u> 0
		CTotal Operating Revenues:	\$	8,778.00	\$ 14,784.00
		Less Expenses:			
		 a. Salaries & Wages - Employees b. Salaries & Wages - Officers, Directors, & Majority 	\$	2,350.00	\$ <u>1,752.0</u> 0
		Stockholders c. Employee Pensions & Benefits d. Purchased Water e. Purchased Power f. Fuel for Power Production g. Chemicals h. Materials & Supplies i. Contractual Services j. Rents k. Transportation Expenses l. Insurance Expense m. Regulatory Commission Expense n. Bad Debt Expense o. Miscellaneous Expense		1,269,00 1,269,00 1,269,00 1,269,00 1,269,00 1,269,00 1,690,00 1,690,00 1,690,00 1,690,00 1,690,00	1/A 2,5/2,00 2,073,00 2,073,00 5,774,00 1,400.00 128,00 665,00 1/A 2,500,00
		p. Depreciation Expense		N/A	4,852.00
		q. Property Taxes		2.500.00	2,500.00
		r. Other Taxes		<u>N/A</u>	N/A_
		s. Income Taxes		<u>N/4</u>	NA
		Operating Indome (Lega)	ė	696900	· 9155.00

	۷.	se	wer				1973		19 <u>70</u>
		Rev	enues (By Class)	:					
		a.				\$	6,384.00	\$.	10,752.00
						_	<u> </u>		
		c. Tot	al Operating Rev	enues:		\$	6,384.00	\$.	10,752.00
		Les	s Expenses:						
		a. b.		s - Office		\$ _	2.717.00	\$.	1,752.00
			Stockholders				<u> </u>		NA
		c. d.	Employee Pensic Purchased Sewag			_	NA		N/A
		e.		je ireatmen: Expense	L		199.00		199.00
		f.					348,00		3603.00
		g.		${\tt Production}$		_	NA		NA
		h.		3		_	699.00		1,095.00
		i. j.	Materials & Sup Contractual Ser	-		_	1,905,00		6089.00
		k.	Rents	VICCD			N/A	•	N/A
		1.	Transportation				550.00		1,107.00
		m.	·				700.00		426.00
		n. o.	Regulatory Comm Bad Debt Expens		ense		241.00		483.00
		р.	Miscellaneous E			_	MA	-	NA
		q.	Depreciation Ex	pense			MA		6,965,00
		r.	Property Taxes				1,000.00		1,000,00
		s.	Other Taxes			_	NA		NA
		t.	Income Taxes				NA		NA
	(0pe	rating Income (I	oss)		\$	<u>5,390.00</u>	\$.	18.423.00
Н.	Outs	tan	ding Debt:						
			<u>Creditor</u>	Date <u>Borrowed</u>	Balance Due		Interest Rate	E:	xpiration Date
	4	_ `				_		•	
	1. <u>#</u>	in	es group, inc	6-13-97	63,60	دحم, ن			2007
	$\frac{2}{3}$		-		-			- -	
	4. —				-				
	_								
I.	Indi	cat	e Type of Tax Re	turn Filed:	:				
			Form 1120	- Corpoi	ration				
	_5.	· Cc	>RP Form 1120		acion apter S Co	orpor	ation		
			Form 1065	- Partne	ership				
			Form 1040	- Schedu	ıle C - Ir	ndivi	dual (Propr	iet	orship)

III. Engineering Dat Outside Engineering Consultant: 1. Name QV. A. Read JR. + association Ernest A. Gelest JR 2. Firm E.A. Read JR + association 3. Address 510 South Central Bactor FL 33830 4. Telephone (941) 533-0783 Individual to contact on engineering matters: 1. Name PAUL E BIEBER 2. Telephone (941) 696-1666 Is the utility under citation by the Department of Environmental Regulation (DER) or county health department? If yes, explain. List any known service deficiencies and steps taken to remedy problems. Manhola leaked durfair water / repaired them Name of plant operator(s) and DER operator certificate number(s) Palter S. Byesser 1258 Is the utility serving customers outside of its certificated area? ____ If yes, explain. _ Wastewater: 1. Gallons per day capacity of treatment facilities existing 40.000 under construction _____ proposed _____ Type and make of present treatment facilities greated Gunalian Contreat Approximate average daily flow of treatment plant effluent _____ 15,000

8. Is the treatment plant effluent chlorinated? Yes If yes, what is the normal dosage rate? Yes Pourdey

7. How do you measure treatment plant effluent?

4. Approximate length of sewer mains:

6. Number of liftstations

Size (diameter) _/0

5. Number of manholes 22

Linear feet

	9.	Tap in fees - Sewer \$ 600.00
	10.	Service availability fees - Sewer \$
	11.	Note DER Treatment Plant Certificate Number and date of expiration: Number D0.53-244654 Expiration Date 1-2-60
	12.	Total gallons treated during most recent twelve months $9.315.00$
	13.	Sewage treatment purchased during most recent twelve months
ł.	Wat	er
	1.	Gallons per day capacity of treatment facilities existing 283,000 under construction proposed
	2.	Type of treatment Chlorination
	3.	Approximate average daily flow of treated water 64,854
	4.	Source of water supply
	5.	Types of chemicals used and their normal dosage rates Chlorine
	6.	Number of wells in service $\underline{\hspace{1cm}}$ Total capacity in gallons per minute (gpm) $\underline{\hspace{1cm}}$
		Diameter/Depth 6 / unknw //
	7.	Reservoirs and/or hydropneumatic tanks:
		Description 5#: dismeter 20# long Capacity
	8.	High service pumping:
		Motor horsepower Pump capacity (gpm)
	9.	How do you measure treatment plant production? flow greter
	10.	Approximate feet of water mains:
		Size (diameter) 6 4 m 2" Linear feet 5.000 2004.

		11.	Note any life flow requirements and imposing government agency
		12.	Number of fire hydrants in service
		13.	Do you have a meter change out program?
		14.	Meter installation or tap in fees - Water \$ 460.00
		15.	Service availability fees - Water \$
		16.	Has the existing treatment facility been approved by DER?
		17.	Total gallons pumped during most recent twelve months 23,622,000
		18.	Total gallons sold during most recent twelve months
		19.	Gallons unaccounted for during most recent twelve months
		20.	Gallons purchased during most recent twelve months
IV.	<u>Rat</u>	e Dat	<u>a</u>
	A.	Indi	vidual to contact on tariff matters:
		1.	Name Paul E. Bielen
		2.	Telephone Number (944) 696-/666
	В.		dule of present rates (Attach additional sheet if more space is ed):
		1.	Water:
			a. Residential Water b. General Service c. Special Contract d. Other
		2.	Sewer:
			a. Residential Sewer b. General Service c. Special Contract d. Other

C.	Num	ber	of Customers (Most rec	ent two years):	
	1.	Wat	er Metered	19 97	19 9%
			Residential General Service Special Contract Other - specify	114	11/1
	2.	Wat	er Unmetered	19 _27	19 28
			Residential General Service Special Contract Other - specify		
	3.	Sew	er	19 97	19 58
			Residential General Service Special Contract Other - specify		

V <u>Affirmation</u>

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

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.