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FLORIDA PUBLIC SERVICE COMMISSION

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APPLICATION FOR A
 STAFF ASSISTED RATE CASE

COMMISSION
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I. GENERAL DATA

- A. Name of Utility: **LITTLE GASPARILLA WATER UTILITY, INC.**
 B. Address: **P.O..BOX 5159, GROVE CITY, FL 34224**

1. Telephone Nos.: **(941)681-2778**
 2. County: **CHAROTTE** Nearest City: **ENGLEWOOD**
 3. General Area Served: **LITTLE GASPARILLA ISLAND**

C. Authority:

1. Water Certificate No. **802_W DEP 6080175** Date Received: **8/12/2008**
 2. Wastewater Certificate No. **N/A** Date Received: **N/A**
 3. Date Utility Started Operations: Water: **1986** Wastewater: **N/A**

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

If utility was purchased, give date **5/23/1991** Amount Paid \$ **100,000**

1. Name of Seller: **DUGALD MCNEILL AND ROBERT HILL**
 2. Was seller affiliated with present owners? Yes No
 3. Did you purchase: Stock or assets only

COM
 API
 APA
 ECO
 ENG
 GCL
 IDM
 TEL
 CLK

E. Type of Legal Entity:

Corporation Partnership Sole Proprietorship

F. Ownership & Officers:

Name	Title	Percent Ownership
1. DIANE K. BOYER	PRESIDENT	50%
2. JACK R. BOYER	VICE PRESIDENT	50%
3. _____	_____	_____
4. _____	_____	_____

G. List of Associated Companies and Addresses:

N/A

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:

Martin S. Friedman

Address:

**Sanlando Center
2180 W State Rd 434
Suite 2118
Longwood, FL 32779**

II. ACCOUNTING DATA

A. Outside Accountant

1. Name:	ROBERT UNDERWOOD	ALSO: ALEJANDRA M. JUFFE
2. Firm:	UNDERWOOD & ROBERTS, PLLC 3110 EDWARDS MILL ROAD SUITE 100	JUFFE & FLISCHEL CPAs 900 PINE STREET #126 ENGLEWOOD, FL 34223
3. Address:	RALEIGH, N.C. 27612	
4. Telephone:	919-664-8803()	941-475-7937

B. Individual To Contact On Accounting Matters:

1. Name: **THERESA CABE**

2. Telephone: (919-664-8803)

C. Location of Books and Records: **1916 MICHIGAN AVE. GROVE CITY, FL 34224**

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

Date Last Filed: **4/25/2013**

E. Has your latest Regulatory Assessment Fee Payment been made?

(January 30 or July 30 whichever is applicable) X Jan 30 July 30

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

1. <u>Water:</u>		
Cost of Plant In Service	\$ 1,421,050	\$ 1,421,050
Less Accumulated Depreciation	589,625 1	628,642
Less Contributed Plant	512,000	536,000

	319,425	256,408
	2011	2012
Net Owner's Investment	\$ N/A	\$ N/A
2. <u>Wastewater:</u>		
Cost of Plant In Service	\$ N/A	\$ N/A
Less Accumulated Depreciation	N/A	N/A
Less Contributed Plant	N/A	N/A
Net Owner's Investment	\$ N/A	\$ N/A

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

	2011	2012
1. <u>Water:</u>		
Revenues (By Class)		
a. WATER REVENUE	\$ 210,959	\$ 238,834
b. IMPACT FEES	13,500	27,000
c. OTHER MISC		
Total Operating Revenues:	\$ 224,459	\$ 265,834
Less Expenses:		
a. Salaries & Wages - Employees	7,119	11,110
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	30,447	63,984
c. Employee Pensions & Benefits		
d. Purchased Water		
e. Purchased Power		
f. Fuel for Power Production		
g. Chemicals	3,108	4,122
h. Materials & Supplies		
i. Contractual Services	36,883	25,413
j. Rents	2,970	3,510
k. Transportation Expenses	7,722	7,173
l. Insurance Expense	3,928	4,240
m. Regulatory Commission Expense	9,303	10,547
n. Bad Debt Expense		
o. Miscellaneous Expense	55,699	46,852
p. Depreciation Expense	37,464	39,017
q. Property Taxes	17,815	11,259
r. Other Taxes	3,702	6,876
s. Income Taxes		

	(5,201)	
Operating Income (Loss)	\$	\$ 4,731
2. <u>Wastewater</u>	N/A	
Revenues (By Class):	\$	\$
a.		
b.		
c.		
Total Operating Revenues:	\$	\$
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		
f. Purchased Power		
g. Fuel for Power Production		
h. Chemicals		
i. Materials & Supplies		
j. Contractual Services		
k. Rents		
l. Transportation Expenses		
m. Insurance Expense		
n. Regulatory Commission Expense		
o. Bad Debt Expense		
p. Miscellaneous Expense		
q. Depreciation Expense		
r. Property Taxes		
s. Other Taxes		
t. Income Taxes		
Operating Income (Loss)	\$	\$

H. Outstanding Debt:

	Creditor	Date Borrowed	Balance Due	Interest Rate	Expiration Date
1.	I.D.N.	2000	573,775	8%	open
2.	Bank of the West	12/31/10	15,757	7.49%	12/31/22
3.	Dougal McNeil	1991	30,000	10%	
	BB&T	3/27/2011	56,633	6.75%	
4.					1/1/2014

I. Indicate Type of Tax Return Field:

Form 1120 -Corporation

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- Form 1120S -Subchapter S Corporation
- Form 1065 - Partnership
- Form 1040 - Schedule C - Individual (Proprietorship)

III
ENGINEERING DATA

- A. Outside Engineering Consultant:
1. Name: **Jay Johnson**
 2. Firm: **DMK**
 3. Address: **435 Commercial Court, Venice, FL 34292**
 4. Telephone: **(941-412-1293)**
- B. Individual to contact on engineering matters:
1. Name: **Jay Johnson**
 2. Telephone: **941-412-1293()**
- C. Is the utility under citation by the Department of Environmental Protection (DEP) or County Health Department?
 If yes, explain: **NO**

D. List any known service deficiencies and steps taken to remedy problems: **needs emergency interconnect**

E. Name of plant operator(s) and DEP operator certificate number(s) held: **Kate Dodge #0015226**

F. Is the utility serving customers outside of its certificated area? **NO**
 If yes, explain:

G. Wastewater:N/A

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

2. Type and make of present treatment facilities:

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: \$
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:

1. Gallons per day capacity of treatment facilities:
 - a. Existing: 72,000GPD
 - b. Under Construction : 0
 - c. Proposed: Interconnect for bulk water
2. Type of treatment: **Desalination**
3. Approximate average daily flow of treated water: **26,600**
4. Source of water supply: wells
5. Types of chemicals used and their normal dosage rates: **Cl2 & line 3 cups each per day, also ASA 600 1 cup per day**
6. Number of wells in service: **3**
Total capacity in gallons per minute (gpm): **180**

Diameter/Depth:	4" / 180'	4" / 180'	6" / 500'
Motor horsepower:	3hp	3hp	3hp
Pump capacity (gpm):	60	60	60

7. Reservoirs and/or hydropneumatic tanks:

Description:	concrete	fiberglass	hydropneumatic
Capacity:	146,000	25,000	300

8. High service pumping:

Motor horsepower:	15hp	15hp		
Pump capacity (gpm):	200	200		

9. How do you measure treatment plant production?

10. Approximate feet of water mains:

Size (diameter):	6"	4"	3"	2" & 1"
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Linear feet:	15,000	6,000	4,000	2,000
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11. Note any fire flow requirements and imposing government agency: NOT AT THIS TIME

12. Number of fire hydrants in service: 14

13. Do you have a meter change out program? No Yes
INCLUDED IN IMPACT

14. Meter installation or tap in fees - Water \$ FEE (EST @ \$500)

15. Service availability fees - Water \$ 4,500

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

17. Total gallons pumped during most recent twelve months: 9,035,000

18. Total gallons sold during most recent twelve months: 9,035,000

19. Gallons unaccounted for during most recent twelve months: 0

20. Gallons purchased during most recent twelve months: 0

IV. RATE DATA

A. Individual to contact on tariff matters:

1. Name: Jack Boyer
2. Telephone Number: 941-626-8294()

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

1. Water:

- a. Residential Water \$4.81/1000 gals
- b. General Service \$49.80/month
- c. Special Contract _____
- d. Other - Specify _____

2. Wastewater:

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

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

	2011	2012
1. Water Metered		
a. Residential	<u>353</u>	<u>358</u>
b. General Service docks	<u>6</u>	<u>6</u>
c. Special Contract Fire/Sewer	<u>2</u>	<u>2</u>
d. Other – Specify Swimming Pools	<u>2</u>	<u>2</u>
2. Water Unmetered	2011	2012
a. Residential	_____	_____
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____

3. Wastewater

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

_____	_____
_____	_____
_____	_____
_____	_____

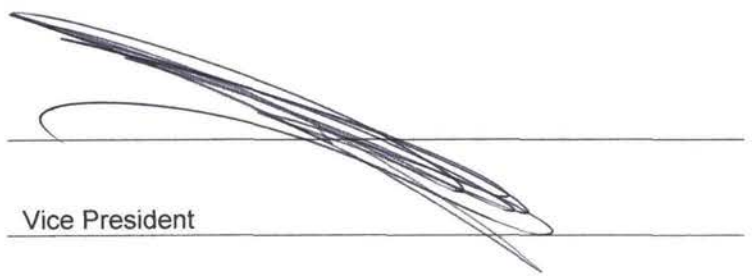
V. AFFIRMATION

Jack Boyer

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 _____

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.