FILED DEC 03, 2015 DOCUMENT NO. 07696-15 FPSC - COMMISSION CLERK

FLORIDA UTILITY SERVICES 1, LLC FPSC - COMMISSION CLERK 3336 GRAND BLVD. SUITE 102 HOLIDAY, FL. 34690 863-904-5574

15 DEC -3 PHI2: 39

December 1, 2015

Commission Clerk Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, FL. 32399

RE: Application for a Staff Assisted Rate Case for East Marion Utilities, LLC in Marion County Florida

Dear Commission Clerk:

Enclosed please find an application for a Staff Assisted Rate Case in Marion County for East Marion Utilities, LLC along with a copy of the utilities current tariff sheets and a copy of the letter, along with the a copy of the complete application that was sent to the Chief Executive of Marion County. The application was mailed to:

Mounir Bouyounes Office Of County Administrator 601 S.E. 25th Ave. Ocala, FL. 34471

The utility requests interm rates and a calendar year 2015 as the test year.

On behalf of the utility,

"S/" Michael Smallridge

Mike Smallridge

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A STAFF ASSISTED RATE CASE

l.	GE	NERAL DATA			
	A.	Name of Utility: EAST MARION UTILI	TIES, LLC		
	В.	Address: 3336 GRAND BLVD. SUITE	102		
		HOLIDAY FLORIDA 34690			
		1. Telephone Nos.: (863) 904-557 4			
		2. County: MARION		Nearest City:	OCALA
		3. General Area Served: LAKEVIE	W WOODS SUBDIVISION		
	C.	Authority:			
		Water Certificate No. 490		Date Received:	12/4/15
		2. Wastewater Certificate No. 425		Date Received:	12/4/15
		3. Date Utility Started Operations:	Water: 1987	Wastewater:	1987
	D.	How System Was Acquired: PURCHAS	SE		
		If utility was purchased, give date 1/1/1	5	Amount Paid \$	107,000
		1. Name of Seller: EAST MARION	SANITARY SYSTEMS.		
		2. Was seller affiliated with present ov	vners? ☐ Yes X☐ No	•	
		3. Did you purchase: Stock	⟨☐ or assets only		
	E.	Type of Legal Entity:			
		☐ Corporation ☐ Partnershi	p	ship	,
F. Ownership & Officers:					
		Name	Title	P	ercent Ownership
		1. MICHAEL SMALLRIDGE	SOLE MANAGING MEMB	ER 100	
		2			
		3.			
		4			

G. List of Associated Companies and Addresses: **HOLIDAY GARDENS UTILITIES, LLC- PASCO COUNTY CRESTRIDGE UTILITIES, LLC-PASCO COUNTY** WEST LAKELAND WASTEWATER, INC- POLK COUNTY 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: II. ACCOUNTING DATA A. Outside Accountant 1. Name: 2. Firm: 3. Address: 4. Telephone: () B. Individual To Contact On Accounting Matters: 1. Name: **DAN WALSH** 2. Telephone: (863) 940 4347 C. Location of Books and Records: **UTILITY OFFICE** Have you filed an Annual Report with the Commission? X☐ Yes ☐ No Date Last Filed: 2014

1.	Water:	2014		2013
	Cost of Plant In Service	\$ 146550	_ \$_	146550
	Less Accumulated Depreciation	 80268	···	77277
	Less Contributed Plant	 0		0
	Net Owner's Investment	\$ 66282	\$	69273
2.	Wastewater:	2014		2013

☐ July 30

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

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

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

Cost of Plant In Service	\$_	257011	_ \$_	257011
Less Accumulated Depreciation	****	156894		153430
Less Contributed Plant			_	
Net Owner's Investment	\$	100,117	_ \$_	103581
G. Basic Income Statement: (Most recent two years)				
1. Water:		2014		2013
Revenues (By Class)				
a. RESIDENTIAL	\$	22075	\$	24346
b. GENERAL SERVICES	Ψ	22010	¥_	24040
c. OTHER		1675		390
Total Operating Revenues:	\$	23750	 \$	24736
Less Expenses:	===		2 =	
a. Salaries & Wages – Employees				
b. Salaries & Wages - Officers, Directors, & Majority Stockholders				
c. Employee Pensions & Benefits				
d. Purchased Water		0		0
e. Purchased Power		4188		3213
f. Fuel for Power Production				
g. Chemicals		1878	_	1133
h. Materials & Supplies		786		
i. Contractual Services		12765	_	13007
j. Rents		6695		1750
k. Transportation Expenses	******	228		
I. Insurance Experise	-			
m. Regulatory Commission Expense		1180		1236
n. Bad Debt Expense				
o. Miscellaneous Expense		160		5603
p. Depreciation Expense		2991		4052
q. Property Taxes		524		1149
r. Other Taxes				
s. Income Taxes		109		
Operating Income (Loss)	\$	(7754)	_ \$_	(6406)

		Reve	enues (By Cla	ass):		\$	33846	_ \$_	35018
		a.							
		b.					***************************************		
		C.					1676		390
		Total	Operating R	evenues:		\$_	35522	_ \$_	35408
		Less	Expenses:						
		a.	Salaries & \	Nages - Employees					
		b.	Salaries & \	Nages - Officers, Directo	ors, & Majority Stockholders		······································		
		C.		Pensions & Benefits					****
		d.	Purchased	Wastewater Treatment			·····		
		e.	_	noval Expense			4693		A
		f.	Purchased				4188		4820
		g.		wer Production					
		h.	Chemicals				1878		1630
		i.	Materials &	• •			786		
		j.	Contractual	Services			12765		18721
		k.	Rents				6695		1750
		I.	Transportat	ion Expenses			229		
		m.	Insurance E	•		****			
		n.		Commission Expense			1689		
		Ο.	Bad Debt E	•					
		p.		ous Expense			160		
		q.	Depreciatio	•			3464		7319
		r.	Property Ta				415		······································
		S.	Other Taxes	_		-			
		t.	Income Tax				109		
		Opera	ating Income	(Loss)		\$ <u>_</u>	1550)	= \$=	1168
H.	Outs	tanding	g Debt:						
		_		Date	Balance	Inte	rest	E	xpiration
		C	reditor	Borrowed	Due	Ra	ite		Date
	1.		·					·	
	2.			*					
	3.			,					
	4.								
1.	Indic		oe of Tax Re						
		Form	1120 -Corpo	ration					
	X	Form	1120S -Subo	chapter S Corporation					
			1065 - Partn						
	\Box			dule C - Individual (Prop	rietorship)				
		. •		aas a marriada (i lop					

2. Wastewater

2014

2013

ENGINEERING DATA

Α.	Outside Engineering Consultant:							
	1. Name:							
	2.	Firm:						
	3.	Address:						
	4.	Telephone: ()					
В.	Indivi	dual to contact or	engineering matte	ers:				
	1.	Name: MICH	AEL SMALLRIDG	E				
	2.	Telephone: (3	52) 302 7406					
C.		utility under citat , explain: NO	ion by the Departn	nent of Environmen	tal Protection (DE	P) or County Heal	th Department?	
D.	List any known service deficiencies and steps taken to remedy problems: NONE							
E.	Name	e of plant operator	r(s) and DEP opera	ator certificate num	ber(s) held: STE	VE MCGEE		
F.		utility serving cus	stomers outside of	its certificated area	a? NO			
	ii yes	, explain.						
G.	Wast	ewater:						
	1.	Gallons per day	capacity of treatm	ent facilities:				
		a. Existing: 50,0)00 b.	Under Construction	on:	c. Proposed:		
	2.	Type and make		ent facilities: EXT		ON		
	Approximate average daily flow of treatment plant effluent: 10,704							
	4. Approximate length of wastewater mains:							
		Size (diameter):	8	4	3			
		Linear feet:	9880	950	950			
	5.	Number of manh	noles: 35					
	6.	Number of lift sta	ations: 2					
	7.	How do you mea	asure treatment pla	ant effluent? TIM	ER			
	8.	Is the treatment	plant effluent chlor	rinated? X Ye	s 🔲 No			

		If yes, what is the norm	nal dosage rate?									
	9.	Tap in fees – Wastewa	ater: \$									
	10.	Service availability fees – Wastewater: \$										
	11.	Note DEP Treatment F	Plant Certificate Num	ber and	date of expira	tion: D001-1	76465					
		Number Expiration Da	te:									
	12.	Total gallons treated d	uring most recent two	elve mor	iths: 3,670, (000						
	13.	Wastewater treatment	purchased during me	ost recer	nt twelve mon	hs: NO						
Н.	Wate	r:										
	1.	Gallons per day capac	ity of treatment facilit	ies:								
		a. Existing: 360,000	b. Under	Construc	ction: 0	c. Propo	osed: 0					
	2.	Type of treatment: ,	CHOLRINE									
	3.	Approximate average daily flow of treated water: 12,000										
	4.	Source of water supply	: WELL									
	5.	Types of chemicals us	ed and their normal o	dosage r	ates: CHL	ORINE						
	6.	Number of wells in ser	vice: 1									
		Total capacity in gallor	ns per minute (gpm):									
		Diameter/Depth:	6 /					1				
		Motor horsepower:	20									
		Pump capacity (gpm):	250									
	7.	Reservoirs and/or hydr	ropneumatic tanks:									
	ſ	Description:	STEEL		<u> </u>							
		Capacity:	6000					MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND				
	8.	High service pumping:						***************************************				
	ſ	Motor horsepower:	0									
		Pump capacity (gpm):	0									

10. Approximate feet of water mains:

9. How do you measure treatment plant production?

Size (diameter):	6	4	2	1 1/2	
Linear feet:	200	8450	1675	375	

- 11. Note any fire flow requirements and imposing government agency:
- 12. Number of fire hydrants in service: 0

		13.	Do	you have a meter change out pr	ogram? X□ No □ Yes	
		14.	Me	ter installation or tap in fees - Wa	ater \$	
		15.	Ser	vice availability fees - Water	\$	
		16.	Has	s the existing treatment facility be	een approved by DEP?	
		17.	Tot	al gallons pumped during most r	recent twelve months: 5,177,000	
		18.	Tot	al gallons sold during most recer	nt twelve months: 5,112,000	
		19.	Ga	llons unaccounted for during mos	st recent twelve months: 65,000	
		20.		llons purchased during most rece	ent twelve months: 0	
IV.	RAT	E DAT	Ά			
	A.	Indivi	dual	to contact on tariff matters:		
		1.	Nai	me: MICHAEL SMALLRIDGE		
		2.	Tel	ephone Number: (352) 302 74	06	
	B.	Sche	dule	of present rates: (Attach addition	nal sheets if more space is needed)	
		1.	Wa	ter:		
			a.	Residential Water	ATTACHED TARIFF SHEETS	
			b.	General Service		
			C.	Special Contract		
			d.	Other - Specify		
		2.	Wa	stewater:		
			a.	Residential Wastewater	ATTACHED TARIFF SHEETS	
			b.	General Service		
			C.	Special Contract		
			d.	Other - Specify		
	C.	Numb	per of	f Customers: (Most recent two y	rears)	
		1.	Wa	ter Metered	2014	2013
			a.	Residential	100	103
			b.	General Service	1	1
			C.	Special Contract		
			d.	Other - Specify		
		2.	Wa	ter Unmetered	2014	2013
			a.	Residential	0	0
			b.	General Service	0	0
			C.	Special Contract	0	0
			d.	Other - Specify	0	0
		3.	Wa	stewater	2014	2013
			a.	Residential	92	92
			b.	General Service	1	1
			C.	Special Contract	0	0
			А	Other - Specify	<u> </u>	^

V. AFFIRMATION

I, MICHAEL SMALLRIDGE 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 Mechan Smeres

Title Solt Managing Member.

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.

COMMISSIONERS:
ART GRAHAM, CHAIRMAN
LISA POLAK EDGAR
RONALD A. BRISÉ
JULIE I. BROWN
JIMMY PATRONIS





DIVISION OF ACCOUNTING AND FINANCE ANDREW L. MAUREY DIRECTOR (850) 413-6900

Public Service Commission

September 21, 2015

Mr. Michael Smallridge East Marion Sanitary Systems, Inc. 3336 Grand Boulevard Suite 102 Holiday, FL 34690

WS-15-0145

Re: Application for 2015 Index Rate Adjustment for East Marion Sanitary Systems in Marion County

Dear Mr. Smallridge:

The following tariff sheets have been approved effective October 1, 2015:

Water Tariff

Fifth Revised Sheet No. 12.0 Fifth Revised Sheet No. 13.0

Wastewater Tariff

Fifth Revised Sheet No. 12.0 Seventh Revised Sheet No. 13.0

Please incorporate these tariff sheets into the approved tariff on file at the utility's office. If you have any questions, please contact David Frank at (850) 413-6534 at our office.

Sinderely,

Andrew L. Maurey

Director

ALM/df Enclosures

GENERAL SERVICE

RATE SCHEDULE (GS)

AVAILABILITY -

Available throughout the area served by the Company.

APPLICABILITY -

For water service to all Customers for which no other schedule applies.

LIMITATIONS -

Subject to all of the Rules and Regulations of this Tariff and General Rules

and Regulations of the Commission.

BILLING PERIOD -

Monthly

RATE -

Meter Sizes	<u>Base</u>	Facility Charge
5/8" x 3/4"	\$	10.05
3/4"	\$	15.10
1"	\$	25.15
1 1/2"	\$	50.29
2"	\$	80.47
3"	\$	160.94
4"	\$	251.47
6"	\$	502.93
Charge per 1,000 gallons	\$	2.46

MINIMUM CHARGE -

Base Facility Charge

TERMS OF PAYMENT -

Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE -

October 1, 2015

TYPE OF FILING -

2015 Price Index

WS-15-0142

MICHAEL SMALLRIDGE ISSUING OFFICER

PRESIDENT TITLE

RESIDENTIAL SERVICE

RATE SCHEDULE (RS)

AVAILABILITY -

Available throughout the area served by the Company.

APPLICABILITY -

For water service for all purposes in private residences and individually

metered apartment units.

LIMITATIONS -

Subject to all of the Rules and Regulations of this Tariff and General Rules

and Regulations of the Commission.

BILLING PERIOD -

Monthly

RATE -

Meter Sizes	Base Facility Charge		
5/8" x 3/4"	\$	10.05	
3/4"	\$	15.10	
1"	\$	25.15	
1 1/2"	\$	50.29	
2" 3"	\$	80.47	
3"	\$	160.94	
4"	\$	251.47	
6"	\$	502.93	
Charge per 1,000 gallons 0 – 10,000 gallons Over 10,000 gallons	\$ \$	2.11 3.15	

MINIMUM CHARGE -

Base Facility Charge

TERMS OF PAYMENT -

Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE -

October 1, 2015

TYPE OF FILING -

2015 Price Index

WS-15-0142

MICHAEL SMALLRIDGE ISSUING OFFICER

PRESIDENT TITLE

GENERAL SERVICE

RATE SCHEDULE (GS)

AVAILABILITY -

Available throughout the area served by the Company.

APPLICABILITY -

For wastewater service to all Customers for which no other schedule

applies.

LIMITATIONS -

Subject to all of the Rules and Regulations of this Tariff and General Rules

and Regulations of the Commission.

BILLING PERIOD -

Monthly

RATE -

Meter Sizes	<u>Base</u>	Facility Charge
5/8" x 3/4"	\$	15.37
3/4"	\$	23.05
1"	\$	38.42
1 1/2"	\$	76.84
2"	\$	122.92
3"	\$	245.86
4"	\$	384.16
6"	\$	768.28
Charge per 1,000 gallons	\$	5.63

MINIMUM CHARGE -

Base Facility Charge

TERMS OF PAYMENT -

Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE –

October 1, 2015

TYPE OF FILING -

2015 Price Index

WS-15-0142

MICHAEL SMALLRIDGE ISSUING OFFICER

PRESIDENT TITLE

RESIDENTIAL SERVICE

RATE SCHEDULE (RS)

AVAILABILITY -

Available throughout the area served by the Company.

APPLICABILITY -

For wastewater service for all purposes in private residences and

individually metered apartment units.

LIMITATIONS -

Subject to all of the Rules and Regulations of this Tariff and General Rules

and Regulations of the Commission.

BILLING PERIOD -

Monthly

RATE -

Meter Sizes

Base Facility Charge

All meter sizes

15.37

Charge per 1,000 gallons

\$ 4.69

10,000 gallon cap

MINIMUM CHARGE -

Base Facility Charge

TERMS OF PAYMENT -

Bills are due and payable when rendered. In accordance with Rule 25-

30.320, Florida Administrative Code, if a Customer is delinquent in paying

the bill for water service, service may then be discontinued.

EFFECTIVE DATE –

October 1, 2015

TYPE OF FILING -

2015 Price Index

FLORIDA UTILITY SERVICES 1, LLC

3336 GRAND BOULEVARD • SUITE 102 • HOLIDAY, FLORIDA 34690 352-302-7406 • MICHAELSMALLRIDGE@GMAIL.COM

Mounir Bouyounes
Office Of County Administrator
601 S.E. 25th Ave.
Ocala, FL. 34471

Re: Application for a Staff Assisted Rate Case to the Florida Public Service Commission by East Marion Utilities, LLC in Marion County Florida.

Dear Mr. Bouyounes:

In accordance with Florida Statues and the rules of the Florida Public Service Commission, enclosed please find a copy of the Application for a Staff Assisted Rate Case and the current tariff sheets that was submitted to the Florida Public Service Commission.

Please feel free to contact me anytime on my cell phone at 352-302-7406 or email utilityconsultant@yahoo.com

On behalf of the utility,

Michael Smallridge