STATE OF FLORIDA



Commissioners: JOE GARCIA, CHAIRMAN J. TERRY DEASON SUSAN F. CLARK JULIA L. JOHNSON E. LEON JACOBS, JR.



CAPITAL CIRCLE OFFICE CENTER 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

Public Service Commission

January 26, 1999

Matthew Feil, Esquire 1000 Color Place Apopka, Florida 32703

Re: Docket No. 971638-SU - Application for amendment of Certificate No. 226-S in Seminole County by Florida Water Services Corporation.

Dear Mr. Feil:

Mr. Jonathan Davidson of the Florida Conflict Resolution Consortium (FCRC) has indicated to me that he has been in contact with both the City of Longwood and Florida Water Services Corporation (FWSC), and that both parties have expressed a willingness to mediate this case with the assistance of the FCRC. It is my understanding that you would like mediation to occur in the Orlando area with the Commission staff participating. Mr. Davidson has stated that he will send you a list of mediators for your convenience.

In order to initiate this process, please file a written request to mediate by February 9, 1999. For your convenience, a sample request for mediation has been attached hereto.

ACK AFA APP CAF CMU CTR EAG LEG LIN OPC RCH	Once the requests have been received, a written Agreement to Engage in Mediation (Agreement) will need to be filed by the parties that choose to participate (please see draft Agreement, attached). The Agreement includes provisions for mediator selection, the allocation of any costs and fees associated with the mediation, and the mediating parties' understanding regarding the confidentiality of discussions and documents introduced during mediation. Mediation will conclude within 60 days of the date the Agreement is signed unless otherwise agreed upon by the parties. If mediation results in settlement of the administrative dispute, then pursuant to Section 120.573, Florida Statutes, the Commission will review it and enter a final order incorporating the agreement of the parties. If mediation terminates without settlement of the dispute, the Commission will notify the parties in writing that the administrative hearing process has resumed.	0 0 7 8 JAN 26 \$
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Once you have had an opportunity to review the Agreement, please contact Jennifer Brubaker at (850) 413-6228 to assist in arranging the date and time of the mediation. I appreciate your willingness to pursue mediation. We look forward to working diligently with you on this matter.

Sincerely,

Lila A. Jaber:/ Bureau Chief Bureau of Water and Wastewater

LAJ/jsb/lw

Attachments

cc: Jonathan Davidson (Florida Conflict Resolution Consortium) Division of Water and Wastewater (Williams, Messer, Redemann) Division of Records and Reporting Richard S. Taylor, Esquire

Sample REQUEST FOR MEDIATION

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Florida Public Service Commission

NAME OF PARTY	PARTY'S REPRESENTATIVE (IF ANY)		
ADDRESS	ADDRESS		
TELEPHONE NUMBER (VOICE)	TELEPHONE NUMBER (VOICE)		
TELEPHONE NUMBER (FAX)	TELEPHONE NUMBER (FAX)		
Statement of preliminary agency action in Doc	ket No		
Using the space below or additional pages if ne will be affected by the Florida Public Service C specifically state the relief sought.			

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AGREEMENT TO ENGAGE IN MEDIATION

FLORIDA PUBLIC SERVICE COMMISSION

Upon signing of this document, each of the parties identified below voluntarily agrees to engage in mediation in good faith for the purpose of resolving the disputed issues of Docket No. ______. The process shall be concluded within 60 days of the date this agreement is signed unless otherwise agreed in writing by all parties.

Each party understands that choosing to engage in mediation is voluntary and does not confer or limit standing in any subsequent judicial or administrative proceeding. However, nonparticipation may limit standing as provided in Rule 28-106.111, FAC. Each party retains the right to a formal hearing before the Florida Public Service Commission (Commission) should the issues fail to be resolved through the mediation process. If any issues remain unresolved, the Commission shall notify the parties in writing of the legal remedies which remain available for disposition of the dispute and the deadlines for pursing each within 7 days of the conclusion of the mediation.

If the parties have selected a mediator, provide the following. Name:_____;
Address:______

; Telephone Number:_____

Each party agrees that the cost of engaging the services of an outside mediator will be shared equally among the parties (excluding the Commission) unless specifically stated otherwise and agreed to in writing by all parties.

Each party agrees that the Commission may assign a staff member to conduct the mediation unless a mutually agreed upon mediator is selected by the parties. There is no charge for mediation services when the mediation is conducted by a member of the Commission staff.

Each party agrees that all mediation communications of the parties or the mediator prepared for the purpose of mediation shall be considered confidential offers of settlement and are not admissible in subsequent administrative, legislative, or judicial proceedings, unless: agreed to in writing by all parties; the communication has already been made public; or, the communication is required to be made public by statute or judicial order.

Each party understands that any agreement reached through the mediation process is subject to final review by the Commission. The Commission's final review of the mediated agreement shall be limited to whether the agreement is lawful and in the public interest.

Signature	Date	Signature	Date
Name of Party		Name of Party	
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Below, please list the date, time and place of the first mediation session.

Date of first mediation session ______ Time_____

Place first session to be conducted ______.

Below, please list the names, addresses, and telephone numbers of any persons who may attend the mediation; please also indicate whether the person is authorized to settle or recommend settlement in this case:

Name			Name			
Representing			Representing Address			
Address		- <u>-</u>				
City	State	zipcode	City	State	zipcode	
Telephone number Authorized to negotiate settlement: Yes No			Telephone number Authorized to negotiate settlement: Yes No			
Name		<u></u>	Name			
Representing			Representing			
Address			Address			
City	State	zipcode	City	State	zipcode	
Telephone numb Authorized to ne	per egotiate settlement: Yes	No	Telephone num Authorized to no	ber egotiate settlement: Yes_	No	
Name	<u> </u>		Name			
Representing		<u> </u>	Representing			
Address			Address		<u>, ,</u> ,	
City	State	zipcode	City	State	zipcode	
Felephone numb Authorized to ne	egotiate settlement: Yes	No	Telephone numl Authorized to ne	egotiate settlement: Yes_	No	