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REPLY TO CENTRAL FLORIDA OFFICE

MARTIN S. FRIEDMAN, P.A.
VALERIE L. LORD
BRIAN J. STREET

July 16, 2007

VIA HAND DELIVERY

Ann Cole, Commission Clerk
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399

070416-WS
(WS813)

RECEIVED FPSC
07 JUL 16 AM 11:15
COMMISSION CLERK

RE: Docket No.: _____; Plantation Landings, Ltd.'s Application for Staff Assisted Rate Case
Our File No.: 42037.01

Dear Ms. Cole:

Enclosed is the Application of Plantation Landings, Ltd., for a Staff Assisted Rate Case for its utility system in Polk County, Florida.

CMP _____ This Application is being filed simultaneously with 4 other small utilities in Polk
COM _____ County since there will be some allocations of common expenses.

CTR _____

ECR _____

GCL _____

OPC 1 _____

RCA _____

SCR _____

SGA _____

SEC _____ MSF/mp
Enclosures

OTH _____

cc: Mr. Ron Baxley (w/o enclosure)

Very truly yours,



MARTIN S. FRIEDMAN
For the firm

DOCUMENT NUMBER-DATE

05924 JUL 16 06

FPSC-COMMISSION CLERK

ORIGINAL

FLORIDA PUBLIC SERVICE COMMISSION

APPLICATION FOR A
STAFF ASSISTED RATE CASE

070416-WS

I. General Data

A. Name of utility PLANTATION LANDINGS, LTD.

B. Address 500 SOUTH FLORIDA AVE., SUITE 700
LAKELAND, FL 33801

1. Telephone Nos. (863) 647-1581

2. County POLK Nearest City _____

3. General area served PLANTATION LANDINGS MOBILE HOME PARK

C. Authority:

1. Water Certificate No. 606-W Date Received 6/21/99

2. Wastewater Certificate No. 522-S Date Received 6/21/99

3. Date utility started operations: Water 1987 Wastewater 1987

D. How system was acquired BUILT

If utility was purchased, give date _____ Amount Paid _____

1. Name of Seller _____

2. Was seller affiliated with present owners? _____

3. Did you purchase: Stock _____ or assets only _____

E. Type of legal entity: Corporation, Partnership or Sole Proprietorship
UNITED PARTNERSHIP

F. Ownership & Officers:

Name	Title	Percent Ownership
1. TODD MAXWELL	PRESIDENT OF G.P.	
2. CENTURY REALTY FUNDS, INC.	G.P.	5%
3. T & A INVESTMENTS, INC.	L.P.	75%
4. WILLARD HOWE	L.P.	10%
5. JOHN & MARGARET MAXWELL	L.P.	10%

PSC/ECR 2 (Rev. 3/02)

G. List of Associated Companies and Addresses:

1. ANGELERS COVE WEST, LTD.
2. HIDDEN COVE, LTD
3. S.V. UTILITIES, LTD
4. CKC VII, LTD.

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):

Martin S. Friedman, Esquire
Rose, Sundstrom & Bentley, LLP
2180 W. State Road 434, Suite 2118
Longwood, FL 32779

II. Accounting Data

A. Outside Accountant

1. Name JIM D. LEE, CPA
2. Firm _____
3. Address 500 SOUTH FLORIDA AVE., STE. 640, LAKELAND, FL 33801
4. Telephone (863) 647-1581

B. Individual to contact on accounting matters:

1. Name JIM D. LEE, CPA
2. Telephone (863) 647-1581

C. Location of books and records COMPANY OFFICE

D. Have you filed an Annual Report with the Commission? Yes

Date Last Filed 5/1/07

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)

	20 <u>06</u>	20 <u>05</u>
1. Water		
Cost of Plant In Service:	\$ <u>329,685</u>	\$ <u>329,685</u>
Less Accumulated Depreciation:	<u>207,198</u>	<u>198,983</u>
Less Contributed Plant:	<u>0</u>	<u>0</u>
Net Owner's Investment:	\$ <u>122,487</u>	\$ <u>130,702</u>

2. Wastewater	2006	2005
Cost of Plant In Service:	\$ 983,836	\$ 983,836
Less Accumulated Depreciation:	605,817	644,471
Less Contributed Plant:	0	0
New Owner's Investment:	\$ 298,019	\$ 339,365

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

1. Water	2006	2005
Revenues (By Class):		
a. <u>RESIDENTIAL</u>	\$ 37,723	\$ 36,350
b. _____	_____	_____
c. _____	_____	_____
Total Operating Revenues:	\$ 37,723	\$ 36,350
Less Expenses:		
a. Salaries & Wages - Employees	14,500	10,880
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c. Employee Pensions & Benefits	_____	_____
d. Purchased Water	_____	_____
e. Purchased Power	3,509	2,706
f. Fuel for Power Production	_____	_____
g. Chemicals	5,170	3,195
h. Materials & Supplies	4,852	2,803
i. Contractual Services	137,050	55,398
j. Rents	_____	_____
k. Transportation Expenses	597	449
l. Insurance Expense	4,490	3,404
m. Regulatory Commission Expense	1,697	1,636
n. Bad Debt Expense	_____	_____
o. Miscellaneous Expense	15,416	15,755
p. Depreciation Expense	8,263	10,108
q. Property Taxes	494	351
r. Other Taxes	_____	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	(\$ 156,618)	(\$ 70,335)

2.	Wastewater	2004	2005
	Revenues (By Class):		
a.	<u>RESIDENTIAL</u>	<u>37,723</u>	<u>36,350</u>
b.	_____	_____	_____
c.	_____	_____	_____
	Total Operating Revenues:	\$ <u>37,723</u>	\$ <u>36,350</u>
	Less Expenses:		
a.	Salaries & Wages - Employees	\$ <u>16,523</u>	\$ <u>13,229</u>
b.	Salaries & Wages - Officers, Directors, & Majority Stockholders	_____	_____
c.	Employee Pensions & Benefits	_____	_____
d.	Purchased Wastewater Treatment	_____	_____
e.	Sludge Removal Expense	<u>6,550</u>	<u>11,560</u>
f.	Purchased Power	<u>10,077</u>	<u>9,465</u>
g.	Fuel for Power Production	_____	_____
h.	Chemicals	<u>9,603</u>	<u>6,479</u>
i.	Materials & Supplies	<u>8,533</u>	<u>15,349</u>
j.	Contractual Services	<u>134,043</u>	<u>56,727</u>
k.	Rents	_____	_____
l.	Transportation Expenses	<u>547</u>	<u>649</u>
m.	Insurance Expense	<u>4,490</u>	<u>3,404</u>
n.	Regulatory Commission Expense	<u>1698</u>	<u>1636</u>
o.	Bad Debt Expense	_____	_____
p.	Miscellaneous Expense	<u>15,154</u>	<u>15,772</u>
q.	Depreciation Expense	<u>41,413</u>	<u>41,413</u>
r.	Property Taxes	<u>2,615</u>	<u>1856</u>
s.	Other Taxes	_____	_____
t.	Income Taxes	_____	_____
	Operating Income (Loss)	(\$ <u>211,875</u>)	(\$ <u>141,189</u>)

H. Outstanding Debt:

	<u>Creditor</u>	<u>Date Borrowed</u>	<u>Balance Due</u>	<u>Interest Rate</u>	<u>Expiration Date</u>
1.	<u>BANK OF AMERICA</u>	<u>12/99</u>	<u>7,920,204</u>	<u>6.35%</u>	<u>7/07</u>
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

I. Indicate Type of Tax Return Filed:

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

III. Engineering Data

A. Outside Engineering Consultant:

1. Name _____
2. Firm _____
3. Address _____
4. Telephone () _____

B. Individual to contact on engineering matters:

1. Name _____
2. Telephone () _____

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.

NONE

E. Name of plant operator (s) and DEP operator certificate number (s) held.

JERRY CORYELL - CLASS C WATER AND WASTEWATER LICENSES

F. Is the utility serving customers outside of its certificated area?

NO

If yes, explain _____

G. Wastewater:

1. Gallons per day capacity of treatment facilities existing 80,000 gpd
under construction 0 proposed 0

2. Type and make of present treatment facilities Extended Air - Concrete

3. Approximate average daily flow of treatment plant effluent 27,882

4. Approximate length of wastewater mains:

Size (diameter)	<u>3"</u>	<u>4"</u>	<u>8"</u>	_____	_____
Linear feet	<u>510</u>	<u>2980</u>	<u>12,660</u>	_____	_____

5. Number of manholes 50

6. Number of liftstations 4

7. How do you measure treatment plant effluent? flow meter

- 8. Is the treatment plant effluent chlorinated? YES If yes, what is the normal dosage rate? 5 gallons/day
- 9. Tap in fees - Wastewater \$ 0
- 10. Service availability fees - Wastewater \$ 0
- 11. Note DEP Treatment Plant Certificate Number and date of expiration: Number FLA 013033
Expiration Date _____
- 12. Total gallons treated during most recent twelve months 8,608,000
- 13. Wastewater treatment purchased during most recent twelve months 0

H. Water

- 1. Gallons per day capacity of treatment facilities existing 10,000 under construction 0 proposed 0
- 2. Type of treatment chlorine - liquid
- 3. Approximate average daily flow of treated water 77,230
- 4. Source of water supply GROUND
- 5. Types of chemicals used and their normal dosage rates 100 gpd
- 6. Number of wells in service 1 Total capacity in gallons per minute (gpm) _____
 Diameter/Depth 12" / 522' _____ / _____
 Motor horsepower _____
 Pump capacity (gpm) _____
- 7. Reservoirs and/or hydropneumatic tanks:
 Description STEEL-GROUND _____
 Capacity 15,000 _____
- 8. High service pumping:
 Motor horsepower N/A _____
 Pump capacity (gpm) _____
- 9. How do you measure treatment plant production? FLOW METERS FROM WELLS
- 10. Approximate feet of water mains:
 Size (diameter) 3" 4" 6" _____
 Linear feet 2120 5110 6960 _____
- 11. Note any fire flow requirements and imposing government agency _____
- 12. Number of fire hydrants in service 14

13. Do you have a meter change out program? No
14. Meter installation or tap in fees - Water \$ 0
15. Service availability fees - Water \$ 0
16. Has the existing treatment facility been approved by DEP? Yes
17. Total gallons pumped during most recent twelve months 28,189,000
18. Total gallons sold during most recent twelve months 21,948,000
19. Gallons unaccounted for during most recent twelve months 6,241,000
20. Gallons purchased during most recent twelve months 0

IV. Rate Data

A. Individual to contact on tariff matters:

1. Name _____
2. Telephone Number (____) _____

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

1. Water: ~~Wastewater~~
- a. Residential Water \$12.57 (incl. 3,000) - over 3000 - 1.26 per thousand
- b. General Service _____
- c. Special Contract _____
- d. Other _____

2. ~~Wastewater:~~

- a. ~~Residential Wastewater~~ _____
- b. ~~General Service~~ _____
- c. ~~Special Contract~~ _____
- d. ~~Other~~ _____

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

1. Water Metered	20 <u>06</u>	20 <u>05</u>
a. Residential	<u>399</u>	<u>399</u>
b. General Service	<u>2</u>	<u>2</u>
c. Special Contract	_____	_____
d. Other - Specify	_____	_____
2. Water Unmetered	20 <u>06</u>	20 <u>05</u>
a. Residential ^{N/A}	_____	_____
b. General Service	_____	_____
c. Special Contract	_____	_____
d. Other - Specify	_____	_____

3. Wastewater

2006

2005

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

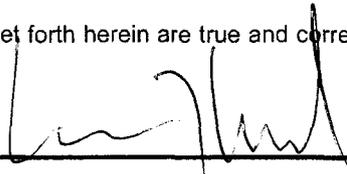
401

401

V. Affirmation

I, TODD MAXWELL 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.