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December 14, 1995

ORIGINAL
FILE COPY

Blanca S. Bayo, Director
Division of Records & Reporting
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

HAND DELIVERY

Re: Docket No. 950387-SU
Application for Increased Wastewater Rates by FLORIDA CITIES
WATER COMPANY - N. Ft. Myers Division in Lee County.

Dear Ms. Bayo:

Enclosed on behalf of Florida Cities Water Company (FCWC) for
filing in the above docket are an original and 15 copies of an
Affidavit of Notice.

Please acknowledge receipt of the foregoing by stamping the
enclosed extra copy of this letter and returning same to my
attention. Thank you for your assistance.

Sincerely,

Wayne L. Schiefelbein
Wayne L. Schiefelbein

ACK ✓
AFA 1
APP _____
CAF _____
CMU _____
CTR _____
WLS/ldv
Enclosures
GAG _____
LEG 1
JIN 5
JPC _____
JCH _____
JEC 1
VAS _____
JTH _____

RECEIVED & FILED

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EPSC-BUREAU OF RECORDS

DOCUMENT NUMBER-DATE

12588 DEC 14 88

FPSC-RECORDS/REPORTING

00508

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Application of)
FLORIDA CITIES WATER COMPANY)
North Ft. Myers Division,)
Wastewater Operations, for an)
increase in Wastewater Rates)
in North Lee County, Florida)
_____)

Docket No. 950387-SU

A F F I D A V I T

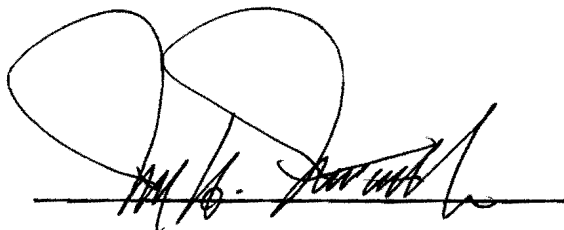
STATE OF: FLORIDA

COUNTY OF: SARASOTA

BEFORE ME, the undersigned authority, duly authorized by law to administer oaths and to take acknowledgments, on this day personally appeared Paul H. Bradtmiller, who, after being duly sworn on oath, deposes and says:


1. That the Affiant has personal knowledge of the matters set forth herein;
2. That on December 7, 1995, a copy of the Notice attached hereto was sent by regular U.S. Mail to all customers of record within the service areas of Florida Cities Water Company, North Ft. Myers Division.


FURTHER AFFIANT SAYETH NOT.



Paul H. Bradtmiller
Executive Vice President
Florida Cities Water Company

SWORN TO and SUBSCRIBED BEFORE me on this 12th day of December, 1995.


NOTARY PUBLIC
State of Florida at large
My Commission Expires:

	ANITA J. CHUBBUCK State of Florida My Comm. Exp. Aug. 18, 1998 Comm. # CG 401896
	<input checked="" type="checkbox"/> PERSONALLY KNOWN BY ME <input type="checkbox"/> PRODUCED I.D.

DOCUMENT NUMBER-DATE
12588 DEC 14 1995
FPSC-RECORDS/REPORTING

FLORIDA CITIES WATER COMPANY

NORTH FT. MYERS DIVISION

December 5, 1995

Dear Customer:

On May 19, 1995, Florida Cities Water Company, North Ft. Myers Division, filed an Application with the Florida Public Service Commission (PSC) to increase wastewater rates and charges in North Ft. Myers. A Customer Meeting was held on July 26, 1995 at the North Ft. Myers High School auditorium to take customer testimony regarding quality of service and the proposed rates. After its analysis of our application, the PSC, under Docket No. 950387-SU, and Order No. PSC-95-1360-FOF-SU, dated November 2, 1995, issued its notice proposing final rates in this case. This Commission proposal was protested on November 27, 1995. Following this protest, Florida Cities Water Company is authorized by statute to implement the rates requested in its original Application, subject to refund. Florida Cities Water Company has instead determined that it will implement the rates as proposed by the Commission's Order, subject to refund. These rates are lower than the requested rates. These new rates and charges, listed below, will be effective for service rendered on or after December 13, 1995 and will appear beginning on your January, 1996 bill.

If you have any questions concerning these rates, please call our office at (941)936-0247. A customer service representative will answer your questions or provide you with an answer in a short period of time.

Sincerely,
FLORIDA CITIES WATER COMPANY

WASTEWATER RATE SCHEDULE

Previous and New Monthly Rates

	<u>Meter Size</u>	<u>Last Authorized Rates</u>	<u>Commission Approved Proposed Final Rates</u>
RESIDENTIAL SERVICE....			
Base Facility Charge:	All	\$24.37	\$28.56
Gallonge Charge per 1,000 Gallons of Water Used (6,000 Gallon Maximum)		\$4.62	\$5.15
GENERAL SERVICE.....			
Base Facility Charge:	5/8" x 3/4"	\$24.37	\$28.56
	1"	60.94	71.41
	1-1/2"	121.87	142.80
	2"	194.99	228.52
	3"	389.98	457.03
	4"	609.35	714.11
	6"	1,218.69	1,428.23
Gallonge Charge per 1,000 Gallons of Water Used (No Maximum Gallonge)		\$5.55	\$6.18

FLORIDA CITIES WATER COMPANY
7401 College Parkway
P.O. Box 6549
Fort Myers, Florida 33911-6549
813/936-0247

00510

UNITED STATES POSTAL SERVICE

Statement of Mailing With Permit Imprints First-Class Mail

(For Priority Mail, Use Form 3605-R)

FCWC - North Ft. Myers - Wastewater
PSC Notice of Rate Increase (Interim)

PKT 950387-5U Rate Case

MAILER: Complete all items by typewriter, pen, or indelible pencil. Use Form 3606 if you need a receipt.

Mailing Information	Post Office of Mailing <i>Osprey 71</i>	Date <i>12/7/95</i>	Processing Category <input type="checkbox"/> Letters (DMM C050) <input type="checkbox"/> Flats (DMM C050) <input type="checkbox"/> Automation-Compatible Flats (DMM C020) <input type="checkbox"/> Irregular Parcels (DMM C050)		USPS Authorized Mailing ID Code(s)			
	Permit No. <i>32</i>	Federal Agency Cost Code	Mailing Statement Seq. No.					
	Permit Holder's Name & Address (Include ZIP Code) <i>Avatory 2140 Surf Gate Panama 7134231</i>	Telephone Number <i>921-5209</i>	Receipt No. <i>2007</i>	No. Sacks		No. Trays <i>5</i>	No. Pallets	No. Other
	Weight of a Single Piece		Total Pieces in Mailing <i>2646</i>			Total Weight of Mailing <i>57</i>		Barcoded Flats Sacking Based On (DMM M020) <input type="checkbox"/> 125 pcs. <input type="checkbox"/> 15 lbs.
	CTAS Cust. Ref. ID		Name and Address of Individual or Organization for Which Mailing is Prepared (If other than the permit holder)			Name and Address of Mailing Agent (If other than the permit holder)		

Postage Computation	<input checked="" type="checkbox"/> For mailings of automation-compatible letter-size pieces (see DMM C810), other than cards, go to Part A on the reverse of this form.	Postage (From Reverse Side)	Part A	\$
	<input checked="" type="checkbox"/> For mailings of non-automation-compatible letter-size pieces (see DMM C050), other than cards, weighing .6875 lb. (11 ounces) or less, go to Part B on the reverse of this form.		Part B	\$
	<input checked="" type="checkbox"/> For mailings of non-letter-size pieces (see DMM C050), other than cards, or of automation-compatible flats (see DMM C050), weighing .6875 lb. (11 ounces) or less, go to Part C on the reverse of this form.		Part C	\$ <i>740.83</i>
	<input checked="" type="checkbox"/> For mailings of postal cards and postcards (see DMM E100), go to Part D on the reverse of this form.		Part D	\$
<input type="checkbox"/> Additional Postage Payment (State reasons) <input type="checkbox"/> Special Service (Specify)		No. Pieces	Rate/Fee Per Pc. = \$	
Total Postage			\$ <i>740.83</i>	

Certification	*The signature of a mailer certifies that it will be liable for and agrees to pay, subject to appeals prescribed by postal laws and regulations, any revenue deficiencies assessed on this mailing. (If this form is signed by an agent, the agent certifies that it is authorized to sign this statement, that the certification binds the agent and the mailer, and both the mailer and the agent will be liable for and agree to pay any deficiencies.)	
	The submission of a false, fictitious, or fraudulent statement may result in imprisonment of up to 5 years and a fine of up to \$10,000 (18 USC 1001). In addition, a civil penalty of up to \$5,000 and an additional assessment of twice the amount falsely claimed may be imposed (31 USC 3802).	
	I hereby certify that all information furnished on this form is accurate and truthful, that this mailing meets all applicable CASS/MASS standards for address and barcode accuracy, and that the material presented qualifies for the rates of postage claimed.	
*Signature of Permit Holder or Agent (Both principal and agent are liable for any postage deficiency incurred)		Telephone Number
<i>C. Wilson</i>		<i>921-5209</i>

USPS Use Only	Single Piece Weight	Are the figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Total Pieces	Total Weight	If "Yes," Reason:	
	Total Postage			
	Check One: <input type="checkbox"/> Verification Not Scheduled <input type="checkbox"/> Presort Verification Performed as Scheduled		Date Mailer Notified	Contact
	I CERTIFY that this mailing has been inspected concerning: (1) eligibility for the rate of postage claimed; (2) proper preparation (and presort where required); (3) proper completion of the statement of mailing; and (4) payment of the required annual fee.		By (Initials)	
Signature of Weigher		Time	AM PM	

Form 3600-R — First-Class Other Than Priority Mail — Permit Imprint

Postage Computation

Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge	Presort / Automation Discounts	Net Rate	Count (Pcs)	Charge
A Automation-Compatible Letter (DMM C810)				B Non-Automation-Compatible Letter .6975 lb. (11 oz.) or less			
Barcoded (5-Digit)		x _____	pcs. = \$ _____	Carrier Route		x _____	pcs. = \$ _____
Barcoded (3-Digit)		x _____	pcs. = \$ _____	Presorted First-Class		x _____	pcs. = \$ _____
ZIP+4 Presort		x _____	pcs. = \$ _____	Single-Piece Rate		x _____	pcs. = \$ _____
Nonpresorted ZIP+4		x _____	pcs. = \$ _____	Nonstandard Surcharge (If Applicable)			
Carrier Route		x _____	pcs. = \$ _____	Presort First-Class and Carrier Route	.05	x _____	pcs. = \$ _____
Presorted First-Class		x _____	pcs. = \$ _____	Single-Piece Rate	.11	x _____	pcs. = \$ _____
Single-Piece Rate		x _____	pcs. = \$ _____				
Total — Part A (Carry to front of form) \$ _____				Total — Part B (Carry to front of form) \$ _____			

C Check One: Automation-Compatible Flat (DMM C050) Other Nonletter — .6975 lb. (11 oz.) or less

ZIP+4 Barcoded* (3/5-Digit)		x _____	pcs. = \$ _____
ZIP+4 Barcoded* (Nonpresorted)		x _____	pcs. = \$ _____
Carrier Route		x _____	pcs. = \$ _____
Presorted First-Class	<u>1274</u>	x <u>2302</u>	pcs. = \$ <u>630.74</u>
Single-Piece Rate	<u>132</u>	x <u>314</u>	pcs. = \$ <u>110.08</u>
Nonstandard Surcharge (If Applicable)			
3/5-Digit ZIP+4 Barcoded, Presorted First-Class, and Carrier Route	.05	x _____	pcs. = \$ _____
Nonpresorted ZIP+4 Barcoded and Single-Piece Rate	.11	x _____	pcs. = \$ _____

D Postal Cards and Postcards

ZIP+4 Barcoded* (5-Digit)	.163	x _____	pcs. = \$ _____
ZIP+4 Barcoded* (3-Digit)	.170	x _____	pcs. = \$ _____
ZIP+4 Barcoded* (Nonpresorted)	.186	x _____	pcs. = \$ _____
ZIP+4 Presort*	.173	x _____	pcs. = \$ _____
Nonpresorted ZIP+4*	.189	x _____	pcs. = \$ _____
Carrier Route	.160	x _____	pcs. = \$ _____
Presorted First-Class	.179	x _____	pcs. = \$ _____
Single-Piece Rate	.200	x _____	pcs. = \$ _____
Nonstandard Surcharge (If Applicable)			
Presort First-Class and Carrier Route	.05	x _____	pcs. = \$ _____
Single-Piece Rate	.11	x _____	pcs. = \$ _____

* Available only for Automation-Compatible Rate (DMM C820)

* Available only for Automation-Compatible Cards (DMM C020)

Total — Part C (Carry to front of form) \$ 740.83

Total — Part D (Carry to front of form) \$ _____