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April 5, 1996

**ORIGINAL
FILE COPY**

Ms. Blanca S. Bayo, Director
Division of Records and Reporting
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850

HAND DELIVERY

RE: Docket No. 950387-SU
Application of FLORIDA CITIES WATER COMPANY, North
Ft. Myers Division, for an increase in wastewater rates in Lee County,
Florida

Dear Ms. Bayo:

Enclosed for filing are an original and fifteen copies of an Affidavit of Notice of Hearing,
in reference to the above docket.

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.

Very truly yours,

B. Kenneth Gatlin

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BKG/meg
Enclosures
cc: Parties of Record

RECEIVED & FILED

Wes
FPSC-BUREAU OF RECORDS

DOCUMENT NUMBER-DATE
04029 APR-5 1996
00576
FPSC-RECORDS/REPORTING

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)
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 Michael E. Murphy, 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 April 1, 1996, 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.

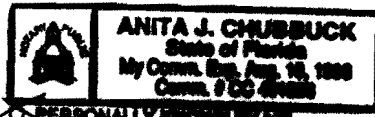
FURTHER AFFIANT SAYETH NOT.

Michael E. Murphy

Michael E. Murphy
Vice President & Chief Financial Officer
Florida Cities Water Company

SWORN TO and SUBSCRIBED BEFORE me on this 4th day of April, 1996.

Anita J. Chubbuck
NOTARY PUBLIC
State of Florida at large



PERSONALLY KNOWN BY ME
 PRODUCED I.D.

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION
NOTICE OF HEARING TO
FLORIDA CITIES WATER COMPANY LEE COUNTY DIVISION
AND ALL OTHER INTERESTED PERSONS

DOCKET NO. 950387-SU

APPLICATION FOR A RATE INCREASE FOR NORTH FORT MYERS DIVISION
IN LEE COUNTY BY FLORIDA CITIES WATER COMPANY

DATED: March 29, 1996

NOTICE IS HEREBY GIVEN that a hearing will be held before the Florida Public Service Commission, regarding the application of Florida Cities Water Company for increased wastewater rates for its North Fort Myers Division at the following time and place:

Wednesday and Thursday, April 24 & 25, 1996 at 10:00 a.m.
Sheraton Harbor Place
Ballroom
2500 Edwards Drive
Ft. Myers, Florida

An evening session will be held beginning at 6:30 P.M., Wednesday, April 24, 1996. The purpose of the evening session will be to take customer testimony. In addition to the evening session, customers will be given the opportunity to present testimony at the beginning of the morning session on Wednesday, April 24, 1996.

All customers wishing to testify are urged to be present at the beginning of the sessions, since the sessions may be adjourned early if no customers are present.

PURPOSE AND PROCEDURE

The purpose of this hearing is to consider the application of Florida Cities Water Company for increased wastewater rates and charges and any motions or other matters that may be pending at the time of the hearing. The Commission may rule on any such motions from the bench or may take the matters under advisement.

At the hearing, all parties shall be given the opportunity to present testimony and other evidence on the issues identified by the parties at the prehearing conference scheduled for 9:30 a.m. on April 4, 1996. All witnesses shall be subject to cross-examination at the conclusion of their testimony.

NOTICE OF HEARING
DOCKET NO. 950387-SU
FLORIDA CITIES WATER COMPANY
PAGE TWO

Any person requiring some accomodation at this hearing, because of a physical impairment, should call the Division of Records and Reporting at (904) 413-6770 at least five calendar days prior to the hearing. If you are hearing or speech impaired, please contact the Florida Public Service Commission using the Florida Relay Service, which can be reached at 1-800-955-8771(TDD).

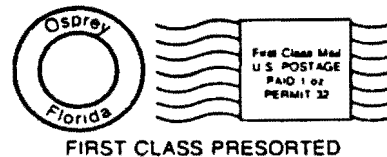
JURISDICTION

The Commission is vested with jurisdiction over the subject matter by the provisions of Chapter 367, Florida Statutes. This hearing will be governed by said Chapter as well as Chapter 120, Florida Statutes and Chapters 25-9, 25-22, and 25-30, Florida Administrative Code.

APPLICABLE STATUTES AND RULES

Sections 367.081, 367.0816, 367.101, Florida Statutes, and any other relevant sections of Chapter 367, Florida Statutes, are applicable to this proceeding, as well as Chapter 120, Florida Statutes, and Chapters 25-22 and 25-30, Florida Administrative Code.

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



Statement of Mailing With Permit Imprints First-Class Mail

(For Priority Mail, Use Form 3605-R)

FCWC - N. Ft. Myers - Washinater ...
 Rate Case # 950387-5U
 PSC Notice of Hearing mailed 4/1/96

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

Mailer's Information	Post Office of Mailing <i>Osprey FL</i>	Date <i>4-1-96</i>	Processing Category <input type="checkbox"/> Letters (DMM C050) <input type="checkbox"/> Flats (DMM C050) <input type="checkbox"/> Automation-Compatible Flats (DMM C820) <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>Quatar Gulf State St Sarasota, FL 34231</i>	Telephone Number <i>921-5209</i>	Receipt No. <i>3023</i>			
	No. Sacks		No. Trays <i>2</i>	No. Pallets		No. Other
	Weight of a Single Piece _____ pounds		Total Pieces in Mailing <i>2550</i>			Total Weight of Mailing
CTAS Cust. Ref. ID		Barcoded Flats Sacking Based On (DMM M823) <input type="checkbox"/> 125 pcs. <input type="checkbox"/> 15 lbs.		Check All That Apply <input type="checkbox"/> Centralized Postage Payment <input type="checkbox"/> Plant loaded to <input type="checkbox"/> BMAU Entry at <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. A / O ZIP _____ <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. SCF 3D ZIP _____ <input type="checkbox"/> Orig. <input type="checkbox"/> Dest. ADC _____		
Name & 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 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. <input 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. <input 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. <input type="checkbox"/> For mailings of postal cards and postcards (see DMM E100), go to Part D on the reverse of this form.	Postage (From Reverse Side)	Part A	\$
			Part B	\$
			Part C	\$ <i>725.29</i>
			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>725.29</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) <i>W. Coddington</i>		Telephone Number <i>921-5209</i>

USPS Use Only	Single-Piece Weight _____ pounds	Are the figures at left adjusted from mailer's entries? <input type="checkbox"/> Yes <input 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	By (Initials)
	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.				Round Stamp (Required) <i>00580</i>
Signature of Weigher			Time	AM PM	

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

32

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 .6875 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 — .6875 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	.279	x 2432	pcs. = \$ 687.53
Single-Piece Rate	.32	x 118	pcs. = \$ 37.76
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) Presorted First-Class and Carrier Route	.05	x	pcs. = \$
Single-Piece Rate	.11	x	pcs. = \$

* Available only for Automation-Compatible Flats (DMM C820) * Available only for Automation-Compatible Cards (DMM C820)

Total — Part C (Carry to front of form) \$ 725.29 **Total — Part D (Carry to front of form) \$ _____**

00581