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October 3, 2003

R. DAVID PRESCOTT HAROLD F. X. PURNELL MARSHA E. RULE GARY R. RUTLEDGE

GOVERNMENTAL CONSULTANTS MARGARET A. MENDUNI HAND DELIVE

Ms. Blanca Bayo, Director Commission Clerk and Administrative Services Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

Re:

Docket No. 03-0921-WS

In re: Joint Application for Acknowledgment of Sale of Osceola County Land and Facilities to Osceola County and Cancellation of Certificate Nos. 66-W and 289-S

Dear Ms. Bayo:

Enclosed for filing in the above referenced docket is the original and five copies of a revised Exhibit F to be substituted for the exhibit that was included with the Joint Application filed on September 19, 2003. This revised Exhibit is submitted at the request of staff to remedy the erroneous identification of the purchaser on the original Exhibit. Please acknowledge receipt of this revision by stamping the extra copy of this letter "filed" and returning the copy to me.

Thank you for your assistance with this filing.

RECEIVED & FILED

Enclosures

Flawater\Bayo.volusia

Sincerely,

AUS **JSMrd** CAF CMP COM CTR ECR GCL OPC WW.S OTH

DOCUMENT NUMBER-DATE

09631 OCT-68

APPLICATION FOR TRANSFER TO GOVERNMENTAL AUTHORITY

(Pursuant to Section 367.071(4)(a), Florida Statutes)

TO: Director, Division of the Commission Clerk & Administrative Services Florida Public Service Commission 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850

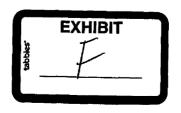
The undersigned hereby makes application for the approval of the transfer of all of the facilities operated under Water Certificate No. 066-W and Wastewater Certificate No. 289-S located in Osceola County, Florida, and submits the following:

PART I APPLICANT INFORMATION

A) The full name (as it appears on the certificate), address and telephone number of the seller (utility):

Florida Water Services Corp Name of Utility	poration	
(407) 598-4100		(407) 598-4241
Phone No.		Fax No.
1000 Color Place Office Street Address		
Apopka	Florida	32703
City	State	Zip Code
PO Box 609520, Orlando, I Mailing address if different		
www.florida-water.com		
Internet address if applicabl	e	

PSC/ECR 012 (Rev. 2/91)



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B)	The name, address and to concerning this application		representative of the utility to contact		
	Kenneth A. Hoffman, Eso Name	q. and/or J. Stephen N	Menton, Esq. (850) 681-6788 Phone No.		
	Rutledge, Ecenia, Purnel Mailing Address	& Hoffman, P.A., P	O Box 551		
	Tallahassee	Florida	32302-0551		
	City	State	Zip Code		
C)	The full name, address at	The full name, address and telephone number of the governmental authority:			
	Osceola County				
	Name of Utility				
	(407) 343-2330		(407) 343-2353		
	Phone No.		Fax No.		
	1 Courthouse Square Office street address	Suite 4200			
	Kissimmee	Florida	34741		
	City	State	Zip Code		
	N/A Mailing address if difference www.osceola.org/ Internet address if applications				
D)	The name, address and telephone number of a representative of the governmental authority to contact concerning this application:				
	Brian P. Armstrong of N	abors, Giblin and Nicl	xerson (850) 224-4070		
	Name		Phone No.		
	1500 Mahan Drive Street address	Suite 200			
	Tallahassee	Florida	32308		
	City	State	Zip Code		
			•		

PART II FINANCIAL INFORMATION

A)	Exhibit <u>A</u> - A copy of the contract pursuant to Rules 25-30.037(4)(c) and (d), Florida Administrative Code.
B)	Exhibit B - A statement regarding the disposition of customer deposits and the accumulated interest thereon.
C)	Exhibit A statement regarding the disposition of any outstanding regulatory assessment fees, fines or refunds owed.
D)	ExhibitD A statement that the buyer (governmental authority) obtained from the utility or the Commission the utility's most recent available income and expense statement, balance sheet and statement of rate base for regulatory purposes and contributions-in-aid-of-construction.
E)	Indicate the date on which the buyer proposes to take official action to acquire the utility:
	Osceola County will take over operations on or about December 8, 2003.

If only a portion of the utility's facilities is being transferred, a revised territory description and map of the utility's remaining territory must be provided, as discussed in PART III, below.

IF THE UTILITY'S ENTIRE FACILITIES ARE BEING TRANSFERRED, PLEASE DISREGARD PART III OF THIS APPLICATION FORM.

PART III CERTIFICATION

A) <u>TERRITORY DESCRIPTION</u>

Exhibit N/A - An accurate description of the utility's revised territory. If the water and wastewater territory is different, provide separate descriptions.

<u>Note:</u> Use the Survey of Public Lands method (township, range, section, and quarter section), if possible, or a metes and bounds description. Give the subdivision or project name. The description should <u>NOT</u> refer to land grants or plat books, but may use geographic boundaries (i.e., road right-of-ways, railroads, rivers, creeks, etc). The object is to make the description as brief, but as accurate as possible.

B) TERRITORY MAPS

Exhibit N/A - One copy of an official county tax assessment map or other map showing township, range and section with a scale such as 1"=200' or 1"=400' on which the remaining territory is plotted by use of metes and bounds or quarter sections and with a defined reference point of beginning. If the water and wastewater territory is different, provide separate maps.

C) TARIFF SHEETS

Exhibit N/A - The original and two copies of tariff sheet(s) revised to show correct service territory. Please refer to Rules 25-9.009 and 25-9.010, Florida Administrative Code, regarding page numbering of tariff sheets before preparing the tariff revisions. (Pages 11-12.) Sample tariff sheets are attached. (Pages 13-16.)

PART IV AFFIDAVIT

	0 0 11	xhibits a	cant) do solemnly swear or affirm that attached thereto are true and correct and statement of the matter to which it rela	l that said
		BY:	Tony Musts Applicant's Signature	
			Tony Isaacs Applicant's Name (Typed)	
			Vice President, Customer Services Applicant's Title *	
Subscrib	ped and sworn to before me this		áloun	day of
	September, , 20	<u>03</u> by	Tony Isaacs	who
is perso	nally known to me Vor produ	ced iden	ntification	Destar 1
		<u> </u>	Notary Public's Signature Rachel L Cowing My Commission DD096330 Expires February 28, 2006	Produced)
			Type or Stamp Commissioned I	Name of

^{*} If applicant is a corporation, the affidavit must be made by the president or other officer authorized by the by-laws of the corporation to act for it. If applicant is a partnership or association, a member of the organization authorized to make such affidavit shall execute same.

EXHIBIT A

See Petition, at Paragraph 8

EXHIBIT B

The deposits of Florida Water's customers in Osceola County currently remain with Florida Water and will be transferred with the individual customer accounts, less any unpaid balances, upon commencement of operations by Osceola County.

EXHIBIT C

All regulatory assessment fees for Florida Water have been paid in full. There are no fines or refunds owed.

EXHBIT D

Osceola County obtained the most recently available income and expense statement, balance sheet, statement of rate base for regulatory purposes, and contributions-in-aid-of-construction applicable to the land and facilities transferred by Florida Water to Osceola County.