

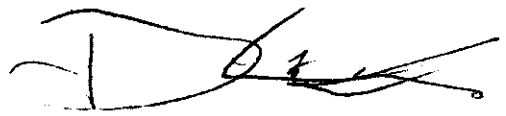
Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, Florida 32399-0850
Attn: Stephanie Clapp

080499
CK# 1006
\$ 750.00
7-14-08
RT

DEPOSIT DATE
854 JUL 15 2008

Ms. Clapp,
Please accept this letter as notification of our intent to begin the application process for TLP Water Inc. Enclosed is Part 1 sections A,B,C,D and the PartVII affidavit notarized including Check #1006 for 750.00 for our application fee. Please feel free to contact myself or Bill Carey if you have any further questions.

Thank you in advance for your assistance.



David Welch
for TLP Water Inc.

RECEIVED-FPSC
08 JUL 15 AM 9:56
COMMISSION
CLERK

TO: _____
FROM: _____
DATE: _____
BY: _____
TITLE: _____
RE: _____
ATTN: _____
CITY: _____
STATE: _____
ZIP: _____
PHONE: _____
FAX: _____
E-MAIL: _____
OTHER: _____
Nonny

DOCUMENT NUMBER-DATE
06064 JUL 15 08
FPSC-COMMISSION CLERK

INFORMATION PACKAGE TO COMPLY WITH
RULE 25-30.034, FLORIDA ADMINISTRATIVE CODE
FOR A UTILITY IN EXISTENCE AND CHARGING RATES
(Pursuant to Section 367.045, Florida Statutes)

06 JUL 15 11 03 AM '03

To: Office of Commission Clerk
Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, Florida 32399-0850

The undersigned hereby wishes to comply with Rule 25-30.034,
Florida Administrative Code for original certificate(s) to operate
a water only and/or wastewater _____ utility in LAKE
_____ County, Florida, and submits the following information:

PART I APPLICANT INFORMATION

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

TLP WATER, INC.

Name of utility

(352) 702-3869 () NONE

Phone No.

Fax No.

12315 U.S. HIGHWAY 441

Office street address

TAVARES FLORIDA 32778

City

State

Zip Code

Mailing address if different from street address

Internet address if applicable

B) The name, address and telephone number of the person to
contact concerning this application:

WILLIAM CAREY (352) 702-3869

Name

Phone No.

12315 U.S. HIGHWAY 441 NO. 24

Street address

TAVARES FLORIDA 32778

City

State

Zip Code

C) Indicate the organizational character of the applicant:
(circle one)

Corporation Partnership Sole Proprietorship
Other _____
(Specify)

D) If the applicant is a corporation, list names, titles and addresses of corporate officers, directors. (Use additional sheet if necessary.)

U.S. HIGHWAY 44/24 WILLIAM E. CAREY PRESIDENT
" " # 23 LEON J. HERLONG VICE-PRESIDENT
" " # 32 LARRY SHUTT SECRETARY-TREASURER

E) If the applicant is not a corporation, list names and addresses of all persons or entities owning an interest in the organization. (Use additional sheet if necessary.)

PART II SYSTEM INFORMATION

A) **WATER**

- (1) Exhibit _____ - A statement describing the proposed types(s) of water service to be provided (i.e., potable, non-potable or both).
- (2) Exhibit _____ - A schedule showing the number of customers currently being served by class and meter size, as well as the number of customers projected to be served when the requested service territory is fully occupied.
- (3) Indicate permit numbers and dates of approval of water treatment facilities by the Department of Environmental Protection (DEP) or the agency designated by the DEP to issue permits:

- (4) Indicate when the water utility system was

PART VIII AFFIDAVIT

I WILLIAM E. CAREY (applicant) do solemnly swear or affirm that the facts stated in the forgoing application and all exhibits attached thereto are true and correct and that said statements of fact thereto constitutes a complete statement of the matter to which it relates.

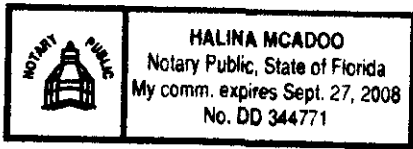
BY: *William E. Carey*
Applicant's Signature

WILLIAM E. CAREY
Applicant's Name (Typed)

PRESIDENT
Applicant's Title *

Subscribed and sworn to before me this 7TH day of JULY, 2008 by WILLIAM E. CAREY who is personally known to me or produced identification

Type of Identification Produced _____



Halina McAdoo
Notary Public's Signature

HALINA MCADOO
Print, Type or Stamp Commissioned
Name of Notary Public

* 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.