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May 1, 2015

Carlotta S. Stauffer, Director Division of Commission Clerk and Administrative Services Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399

REDACTED

RE: Docket No. 140174-WU; Application for approval of transfer of Certificate No. 117-W from Crestridge Utility Corporation to Crestridge Utilities, LLC in Pasco County <u>Our File No.: 47136.03</u>

Dear Ms. Stauffer:

Enclosed is the Request for Confidential Classification filed on behalf of Michael Smallridge, along with the confidential documents in highlighted and redacted format.

Please do not hesitate to contact me if you have any questions.

Very truly yours,

MARTIN S. FRIEDMAN For the Firm

MSF/

cc: Mike Smallridge (via email) Suzanne Brownless (via email)

BEFORE THE FLORIDA PUBLIC SERVICE COMMISSION

In re: Application for approval of transfer of Certificate No. 117-W from Crestridge Utility Corporation to Crestridge Utilities, LLC In Pasco County

Docket No. 140174-WU

MICHAEL SMALLRIDGE'S REQUEST FOR CONFIDENTIAL CLASSIFICATION

Michael Smallridge ("Smallridge"), by and through his undersigned counsel, files this Request for Confidential Classification in relation to Document No. 00503-15, which was filed in response to #6 of the Deficiency Letter dated October 7, 2014 (Document No. 05680-14).

1. Pursuant to 367.156, Florida Statutes, this Commission has the authority to classify certain material as proprietary confidential business information. This classification exempts the material from public disclosure under Section 119.07(1), Florida Statutes.

2. Smallridge requests that Document No. 00503-15 be classified as proprietary confidential business information under Section 367.156, Florida Statutes, and Rule 25-22.006, Florida Administrative Code (the "Confidential Information"). If this request is granted, then the subject portions of said document filed in response to #6 of the Deficiency Letter will be exempt from Section 119.07(1), Florida Statutes. Attached hereto as Exhibit "A" is a Justification Matrix providing a justification for the Utility's request. The information is attached hereto both in highlighted and redacted format.

3. The information produced in response to #6 of the Deficiency Letter and is intended to be and are treated by Smallridge as private and confidential and has not been disclosed externally and has been strictly controlled internally.

4. The information consists of the Personal Financial Statement of the owner of Crestridge Utilities, LLC ("Utility"). This information should be classified as proprietary confidential business information because it is the personal financial information of the owner unrelated to his

compensation from the Utility, and disclosure would impair the owner's competitive interests as he moves to acquire other systems in the future.

5. Requiring the disclosure of the owner's person financial information would violate the owner's right to privacy under Article I, Section 23 of the Florida Constitution.

WHEREFORE, Michael Smallridge requests confidential treatment of the referenced documents and the entry of the protective order that is consistent with this Motion.

Respectfully submitted this 1st day of May, 2015, by:

Friedman & Friedman, P.A. 766 North Sun Drive, Suite 4030 Lake Mary, FL 32746 Phone: (407) 830-6331 Fax: (407) 878-2178 mfriedman@ff-attorneys.com

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MARTIN S. FRIEDMAN Florida Bar No.: 0199060 For the Firm

CERTIFICATE OF SERVICE DOCKET NO. 140174-WS

I HEREBY CERTIFY that a true and correct copy of the foregoing Request for Confidential Classification has been sent by overnight courier service to the PSC Clerk and redacted copies furnished by E-Mail to the following parties this 1st day of May, 2015:

Suzanne Brownless, Esquire Office of General Counsel Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850 <u>sbrownle@psc.state.fl.us</u>

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MARTIN S. FRIEDMAN For the Firm

Exhibit "A"

JUSTIFICATION MATRIX

ted financial information of the owner is to any ratemaking function with regard to (e) Disclosure of the compensation data air the owner's competitive interests he e other utilities in the future. al information relates to the owner in his capacity, and is not information of the
to any ratemaking function with regard to (e) Disclosure of the compensation data air the owner's competitive interests he e other utilities in the future. al information relates to the owner in his
Section 23 of the Florida Constitution. of the information would invade the ats of the owner.
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CenterState Bank

Personal Financial Statement

To: CenterState Bank of Florida (the Bank)

5, *

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Please read the following directions before completing this Personal Financial Statement.

- 1. Complete all sections, except Section 2, if you are applying for individual credit in your own name and are relying solely on your own income or assets for repayment or if this personal financial statement relates to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s).
- 2. Also, complete Section 2 if any of the following apply:
 - If you are applying for joint credit with another person, provide information about the joint applicant.
 - If you are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, provide information about the person on whose alimony, support or maintenance payments or income or assets you are relying.
 - If this is a joint guaranty of the indebtedness of other person(s), firm(s), corporation(s), provide information about the joint guarantor.

Section 1 – Individual/Applicant Information (please print) Section 2 – Other Party/Co-Applicant					rmation
Name		,	Name		
Michael Andrew Smallridge					
Residence Address		fan núr skop og en som som her som her sog en spelige op de som og	Residence Address		
9539 E. Southgate Dr					
City	State	Zip Code	City	State	Zip Code
Inverness	FL	34450			
Position or Occupation	**************************************	· · · · ·	Position or Occupation		
Utility Owner-Self employed.					
Business Name			Business Name	······································	
Florida Utility Services 1, LLC					
Business Address		<u>,,</u>	Business Address		
3336 Grand Blvd Suite 102					
City	State	Zip Code	City	State	Zip Code
Holiday	FI,	34690			
Years with Business			Years with Business		
25					
Res. Phone	Bus. Phone		Res. Phone	Bus. Phone	
(352-302-7406)	(863-904-5574)		()	()	
		CONFI	DENTIAL	an yan kanan da dala da babi dan dala di shi shi yang ta yan nya mangan kanan kanan kanan kanan kanan kanan ka	

Statement of Financial Condition as of ____March 1__

Assets	Dollars	Jt*	Liabilities	Dollars	Jt*
Cash and Short-term Investments (Sch A)			Outstanding Credit Card Balances		0
Stocks and Bonds (readily marketable) (Sch B)			Taxes Payable		0
Unlisted Securities (Sch C)			Policy Loan (life insurance) (Sch D)		0
Notes Receivable & Accounts Receivable			Montgages & Obligations Due (Schs F & G)		0
Cash Surrender Value-Life Insurance (Sch D)			Notes & Accounts Payable (Sch H)		0
General/Ltd Partnership Interests (Sch E)			Other Liabilities (list):		0
Retirement Accounts		·····			·····
Personal Property					Halinianian en
Automobiles					
Real Estate - Personal Residences (Sch F)			anten contrata en canado e este este este este en		
Real Estate - Investments (Sch G)					
Real Estate Investments (Direct & Partnership Interests)					
Other Assets (list):					

TOTAL ASSETS			TOTAL LIABILITIES		
·			NET WORTH (total assets minus total liabilities)		

Section 4 – Income Statement									
Annual Income	Applicant	Co-Applicant	Annual Expenses	Applicant	Co-Applicant				
Salary		0	Home Mortgage (Principal & Interest)		0				
Bonus and Commissions		0	Loan Payments (including other R/E)		0				
Interest and Dividends		0	Income Tax (State & Federal)		0				
Alimony, Separate Maintenance, Child Support**		0	Planned or Required Investments/ Partnership Contributions		0				
Capital Gains		Ö	General Living Expenses		0				
Real Estate Income		0	Other Expenses (list):		0				
Other Income (list):		0							
					······································				
GROSS INCOME			TOTAL EXPENSES						

Section 5 - Contingent Liabilities (include brief description)			
		Applicant	Co-Applicant
As endorser or guarantor on notes/leases/contracts; 0			
On letters of credit:		*	······
Current or pending suits or other litigation:			
Other (Partnership, etc.) explain: 0		*	
	TOTAL	*	5

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Please check if jointly owned with spouse or other party listed in Section 2.
** Alimony, separate maintenance, and/or child support income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Schedule A: Cash & S	Short-term Investi	ments (certificat	es of deposit, commercial pap	er, money ma	rket funds,	etc.)
Name of Institution	Savings Accts. (\$ amount)	Checking Accts. (S amount)	Other Short-term investments (type and \$ amount)	Total	Pledged? (Y/N)	Owner(s) Code*
1						
ία.						
Total						

Schedule B: Listed Stocks & Bonds (include U.S. Government and Marketable Securities traded on stock exchange)

Number of Shares or Face Value (Bonds)	Description	Market Value	Margin?	Restricted?	Pledged?	Owner(s)

Schedule C: Unlisted Securities (closely held corporation NOT listed on stock exchange)

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Number of Shares	Description	Source of Value	Value	% of Company Owned	Picdged? (Y/N)	Owner(s) Code*
Nu .						

Schedule D: Life Insuran	ce Carried (include i	ndividual and gro	up insurance)			
Name of Insurance Company	Owner of Policy	Beneficiary	Face Value	Policy Loans	Cash Surrender	Assigned?

Schedule E: General an	d/or Limited Pa	rtnership Inte	erests (please a	attach K-1 from	n Partners	hip tax ret	turn)
Name of Partnership	Type of Investmer	nt (L)imited (G)eneral	Amount Invested	Fair Market Value of Interest	Annual Contribution	Pledged? (Y/N)	Owner(s) Code*
			10				-
* Owner(s) Code: A=Appl C=Co-A		ecount of Applicant a count of Applicant ar		JC=Joint Account of (Co-Applicant and	i another party	
Schedule F: Real Estate	(personal reside	ences)					
Description/Address of Property	MOTIGAGE HOLDER	aturity Date Title in Ne	ame of Purchase Date	Cost Pi	resent Loan Balance	Monthly M Paymt. M	farket Value
9539 E. Southgate Dr.	Suncoast Credit Union	minc	1998	89,900			

chedule G: Real Estate Investments											
Description/Address of Property	Mongage Holder	Maturity Date	% Owned	Title in Name of	Purchase Date	Cost	Present Loan Balance	Market Value	Total Annual Rental Income	Monthly Loan Pasmt	Other Expense

Schedule H: Notes & Accounts Payable (also include credit lines and other commitments even if unused) Orig. Amt. Payment Maturity Interest Description of Collateral Debtor(s) Name of Creditor **Balance** Owing Of Loan **Repayment Terms** Date Rate (if any) Code* AC=Joint Account of Applicant and Co-Applicant * Debtor(s) Code: A=Applicant JC=Joint Account of Co-Applicant and another party

C=Co-Applicant JA=Joint Account of Applicant and another party Were your gross revenues \$1,000,000 or less in the previous fiscal year?

If you answered "yes" and the Bank denies your application for credit, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact: *Chief Compliance Officer, CenterState Bank of Florida, N.A., 300 W Central Avenue, Lake Wales, FL 33853* Within 60 days from the date you are notified of the Banks decision. The Bank will send you a written statement of reason(s) for the denial within 30 days of receiving your written request for the statement. The notice below describes additional protections extended to you. <u>NOTICE</u>: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, natural origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or a part of the applicants income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Protection Act, the federal agency that administers compliance with this law concerning this creditor is: *Customer Assistance Group, Comptroller of the Currency, 1301 McKinney Street, Houston, TX 77010-9050.*

ersonal Information					
The information contained in this statement i	e provided for the sumore	of abtaining or maintai			
firms or corporations in whose behalf the unc	ersigned may either sever	of obtaining, of maintain ally or jointly with other	s everate a guaranty in i	to Bank's favor. Each undersigned of	r person,
understands that the Bank is relying on the in	formation provided herein	(including the designati	on made as to ownership	of property) in deciding to gram	ncu t or continue
credit. Each undersigned represents and war	rants that the information	provided is true and com	plete and that the Bank n	nay consider this statement as co	antinuing to
be true and correct until a written notice of a	change is given to the Bar	ik by the undersigned. T	he Bank is authorized to	make all inquiries it deems nece	ssarv to
verify the accuracy of the statements made he	crein, and to determine the	credit worthiness of the	undersigned. The Bank	is authorized to answer question	ns about its
credit experience with the undersigned.					

credit experience with the undersigned. D Notice - Joint Credit We intend to apply for joint credit (Initials)			
Date Signed	Signature (individual)	Social Security #	Date of Birth
	Muhl Amaga		04/30/1969
Date Signed	Signature (other party)	Social Security #	Date of Birth