REQUEST TO ESTABLISH DOCKET (Please type or print. File original with CLK.)				
Date:	3/29/2019			
1. From Division / Staff:		Staff:	Division Of Economics / Bruce SA	
2. OPR:	ECO			$\bigcirc$
3. OCR:	GCL			
4. Suggested Docket Title:			Revision of wastewater service ava	ailability charges for Ni Florida in Pasco County.
5. Program/Module/Submod			lule Assignment:	A4a
6. Suggested Docket Mailing List				
a. Provide NAMES/ACR			ONYMS, if registered company	Provided as an Attachment
Company Code, if applicable: SU915		Parties (include address, if different from MCD):		Representatives (name and address):
b. Pro	vide CC	OMPLETE I	NAME AND ADDRESS for all othe	ers (match representatives to companies)
			d persons, if any,	ers (match representatives to companies)
if applicat	ole:	(include a	address, if different from MCD):	Representatives (name and address):
7. Check one: Comments:		Supp	orting documentation attached	To be provided with Recommendation