

CLASS "C"

WATER AND/OR WASTEWATER UTILITIES

(Gross Revenue of Less Than \$200,000 Each)

ANNUAL REPORT

OF

RIVER GROVE UTILITIES, INC

Exact Legal Name of Respondent

WS979-20-AR

Certificate Number(s)

Submitted To The

STATE OF FLORIDA

RECEIVED
FLORIDA PUBLIC SERVICE
COMMISSION
2022 FEB 16 PM 1:05
DIVISION OF
ACCOUNTING & FINANCE

PUBLIC SERVICE COMMISSION

FOR THE

YEAR ENDED DECEMBER 31, 2020

REPORT OF

RIVER GROVE UTILITIES, INC

(EXACT NAME OF UTILITY)

8440 US HWY 1 MICCO, FL 32976 _____ Mailing Address	8440 US Hwy 1, Micco FL32976 BREVARD _____ Street Address County
Telephone Number <u>772-664-4560</u>	Date Utility First Organized <u>5/23/2017</u>
Fax Number <u>772-228-9321</u>	Customer Billing Started <u>9/18/2020</u>
	E-mail Address rbass5992@gmail.com

Sunshine State One-Call of Florida, Inc. Member No. _____

Check the business entity of the utility as filed with the Internal Revenue Service:

- Individual
 Sub Chapter S Corporation
 1120 Corporation
 Partnership

Name, Address and phone where records are located: RIVER GROVE MOBILE HOME VILLAGE 1&2
8440 US HWY 1, MICCO FL 32976

Name of subdivisions where services are provided: RIVER GROVE MOBILE HOME VILLAGE 1&2
8440 US HWY 1, MICCO FL 32976

CONTACTS:

Name	Title	Principal Business Address	Salary Charged Utility
Person to send correspondence: <u>RICHARD BASS</u>	<u>UTILITY MANAGER</u>	<u>8440 US HWY 1</u> <u>MICCO, FL 32976</u>	\$1,000.00/WK Contract Labor CCE, INC.
Person who prepared this report: <u>RICHARD BASS</u>	<u>UTILITY MANAGER</u>	<u>238 Main Street, Sebastian</u>	
Officers and Managers: <u>BONNIE E DOUGLAS</u>	<u>P/D</u>	<u>6045 US Hwy 1, Grant</u>	\$ <u>0</u>
<u>SANDRA J DOUGLAS</u>	<u>VP/D</u>	<u>9130 Central Avenue</u>	\$ <u>0</u>
<u>CHARLES S DOUGLAS</u>	<u>VP/D</u>	<u>4985 S.us Hwy 1</u>	\$ <u>0</u>
<u>CONNIE S DOUGLAS</u>	<u>S/D</u>	<u>2275 Grant Road</u>	\$ <u>0</u>
<u>KATHLEEN D CLASEN</u>	<u>T/D</u>	<u>2800 Rocky Point Road</u>	\$ <u>0</u>

Report every corporation or person owning or holding directly or indirectly 5 percent or more of the voting securities of the reporting utility:

Name	Percent Ownership in Utility	Principal Business Address	Salary Charged Utility
<u>BONNIE E DOUGLAS</u>	<u>66.70%</u>	<u>6045 US Hwy 1</u>	\$ <u>0</u>
<u>SANDRA J DOUGLAS</u>	<u>33.30%</u>	<u>9130 Central Avenue</u>	\$ <u>0</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

UTILITY NAME: RIVER GROVE UTILITIES, INC.

YEAR OF REPORT DECEMBER 31, 2020

INCOME STATEMENT

Account Name	Ref. Page	Water	Wastewater	Other	Total Company
Gross Revenue:					
Residential_____		\$ 23,851	\$ 15,239	\$ 465	\$ 39,555
Commercial_____					
Industrial_____					
Multiple Family_____					
Guaranteed Revenues_____					
Other (Specify)_____					
Total Gross Revenue_____		\$ 23,851	\$ 15,239	\$ 465	\$ 39,555
Operation Expense (Must tie to pages W-3 and S-3)	W-3 S-3	\$ 11,253	\$ 686	\$ 0	\$ 11,939
Depreciation Expense_____	F-5	0			
CIAC Amortization Expense_____	F-8				
Taxes Other Than Income_____	F-7				
Income Taxes_____	F-7				
Total Operating Expense		\$ 11,253	686	0	\$ 11,939
Net Operating Income (Loss)		\$ 12,598	\$ 14,553	\$ 465	\$ 27,616
Other Income:					
Nonutility Income_____		\$ _____	\$ _____	\$ _____	\$ _____
_____		_____	_____	_____	_____
Other Deductions:					
Miscellaneous Nonutility Expenses_____		\$ _____	\$ _____	\$ _____	\$ _____
Interest Expense_____		_____	_____	_____	_____
_____		_____	_____	_____	_____
_____		_____	_____	_____	_____
Net Income (Loss)		\$ 12,598	\$ 14,553	\$ 465	\$ 27,616

UTILITY NAME: RIVER GROVE UTILITIES,INC

YEAR OF REPORT DECEMBER 31,2020

COMPARATIVE BALANCE SHEET

ACCOUNT NAME	Reference Page	Current Year	Previous Year
Assets:			
Utility Plant in Service (101-105) _____	F-5,W-1,S-1	\$ 0	\$ 0
Accumulated Depreciation and Amortization (108)_____	F-5,W-2,S-2	0	0
Net Utility Plant_____		\$ 0	\$ 0
Cash_____		0	0
Customer Accounts Receivable (141)_____		0	0
Other Assets (Specify):_____		0	0
_____		0	0
_____		0	0
_____		0	0
Total Assets_____		\$ 0	\$ 0
Liabilities and Capital:			
Common Stock Issued (201)_____	F-6	100%	0
Preferred Stock Issued (204)_____	F-6	0	0
Other Paid in Capital (211)_____		63535	0
Retained Earnings (215)_____	F-6	0	0
Proprietary Capital (Proprietary and partnership only) (218)_____	F-6	0	0
Total Capital_____		\$ 63535	\$ 0
Long Term Debt (224)_____	F-6	\$ 0	\$ 0
Accounts Payable (231)_____		0	0
Notes Payable (232)_____		0	0
Customer Deposits (235)_____		1372	0
Accrued Taxes (236)_____		0	0
Other Liabilities (Specify)_____		0	0
_____		0	0
_____		0	0
Advances for Construction_____		0	0
Contributions in Aid of Construction - Net (271-272)_____	F-8	0	0
Total Liabilities and Capital_____		\$ 64907	\$ 0

UTILITY NAME RIVER GROVE UTILITIES, INC

YEAR OF REPORT DECEMBER 31, 2020

GROSS UTILITY PLANT

Plant Accounts: (101 - 107) inclusive	Water	Wastewater	Plant other Than Reporting Systems	Total
Utility Plant in Service (101)	\$ 23851	\$ 15239	\$ _____	\$ _____
Construction Work in Progress (105) _____	0	_____	_____	_____
Other (Specify) _____ Operating Expenses	11842	10821	_____	_____
_____	_____	_____	_____	_____
Total Utility Plant _____	\$ 12009	\$ 4418	\$ _____	\$ _____

ACCUMULATED DEPRECIATION (A/D) AND AMORTIZATION OF UTILITY PLANT

Account 108	Water	Wastewater	Other Than Reporting Systems	Total
Balance First of Year _____	\$ _____	\$ _____	\$ _____	\$ _____
Add Credits During Year:				
Accruals charged to depreciation account _____	\$ _____	\$ _____	\$ _____	\$ _____
Salvage _____	_____	_____	_____	_____
Other Credits (specify) _____	_____	_____	_____	_____
Total Credits _____	\$ _____	\$ _____	\$ _____	\$ _____
Deduct Debits During Year:				
Book cost of plant retired _____	\$ _____	\$ _____	\$ _____	\$ _____
Cost of removal _____	_____	_____	_____	_____
Other debits (specify) _____	_____	_____	_____	_____
Total Debits _____	\$ _____	\$ _____	\$ _____	\$ _____
Balance End of Year _____	\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31, 2020

CAPITAL STOCK (201 - 204)

	Common Stock	Preferred Stock
Par or stated value per share_____	_____	_____
Shares authorized_____	100	_____
Shares issued and outstanding_____	100	_____
Total par value of stock issued_____	635	_____
Dividends declared per share for year_____	0	_____

RETAINED EARNINGS (215)

	Appropriated	Un-Appropriated
Balance first of year_____	\$ _____	\$ _____ 0
Changes during the year (Specify): _____ _____ _____	_____ _____ _____	_____ _____ 0
Balance end of year_____	\$ _____	\$ 16733.19

PROPRIETARY CAPITAL (218)

	Proprietor Or Partner	Partner
Balance first of year_____	\$ _____	\$ _____
Changes during the year (Specify): _____ _____ _____	_____ _____ _____	_____ _____ _____
Balance end of year_____	\$ _____	\$ _____

LONG TERM DEBT (224)

Description of Obligation (Including Date of Issue and Date of Maturity):	Interest		Principal per Balance Sheet Date
	Rate	# of Pymts	
_____ _____ _____	_____ _____ _____	_____ _____ _____	\$ _____ _____ _____
Total_____			\$ _____

UTILITY NAME: RIVER GROVE UTILITIES

YEAR OF REPORT DECEMBER 31,2020

TAX EXPENSE

(a)	Water (b)	Wastewater (c)	Other (d)	Total (e)
Income Taxes:				
Federal income tax_____	\$ 0	\$ 0	\$ 0	\$ 0
State income Tax_____	0	0	0	0
Taxes Other Than Income:				
State ad valorem tax_____	0	0	0	0
Local property tax_____	0	0	0	0
Regulatory assessment fee_____	587.81	685.76	0	1273.62
Other (Specify)_____	0	0	0	0
_____		0	0	0
_____		0	0	0
Total Tax Expense_____	\$ 587.81	\$ 587.81	\$ 0	\$ 1273.62

PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES

Report all information concerning outside rate, management, construction, advertising, labor relations, public relations, or other similiar professional services rendered the respondent for which aggregate payments during the year to any corporation, partnership, individual, or organization of any kind whatever amounting to \$500 or more.

Name of Recipient	Water Amount	Wastewater Amount	Description of Service
CCE,INC	\$ 4503	\$ 4503	UTILITY MANAGER
JCP TRUCKING	\$ 490	\$ 4731	MAINTANCE
TREASURE COAST CUTS	\$	\$ 400	LAWN MAINTANCE
VERO CHEMICAL	\$	\$ 43	CHLORINE
FP&L	\$	\$ 6755	ELECTRIC
BAREFOOT BAY UTILITIES	\$ 7496	\$ 0	PURCHASED WATER
_____	\$	\$	_____
_____	\$	\$	_____
_____	\$	\$	_____
_____	\$	\$	_____
_____	\$	\$	_____

UTILITY NAME: RIVER GROVE UTILITIES, INC

YEAR OF REPORT DECEMBER 31, 2020

CONTRIBUTIONS IN AID OF CONSTRUCTION (271)

(a)	Water (b)	Wastewater (c)	Total (d)
1) Balance first of year_____	\$ 949228	\$ 0	\$ _____
2) Add credits during year_____	\$ _____	\$ _____	\$ _____
3) Total_____	949228	_____	_____
4) Deduct charges during the year_____	_____	_____	_____
5) Balance end of year_____	949228	_____	_____
6) Less Accumulated Amortization_____	_____	_____	_____
7) Net CIAC_____	\$ 949228	\$ _____	\$ _____

ADDITIONS TO CONTRIBUTIONS IN AID OF CONSTRUCTION DURING YEAR (CREDITS)

Report below all developers or contractors agreements from which cash or property was received during the year.		Indicate "Cash" or "Property"	Water	Wastewater
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Sub-total_____	_____	_____	\$ _____	\$ _____
Report below all capacity charges, main extension charges and customer connection charges received during the year.				
Description of Charge	Number of Connections	Charge per Connection		
_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Credits During Year (Must agree with line # 2 above.)_____			\$ _____	\$ _____

ACCUMULATED AMORTIZATION OF CIAC (272)

	Water	Wastewater	Total
Balance First of Year_____	\$ _____	\$ _____	\$ _____
Add Debits During Year:_____	_____	_____	_____
Deduct Credits During Year:_____	_____	_____	_____

**** COMPLETION OF SCHEDULE REQUIRED ONLY IF AFUDC WAS CHARGED DURING YEAR ****

UTILITY NAME RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31,2020

SCHEDULE "A"

SCHEDULE OF COST OF CAPITAL USED FOR AFUDC CALCULATION (1)

Class of Capital (a)	Dollar Amount (b)	Percentage of Capital (c)	Actual Cost Rates (d)	Weighted Cost [c x d] (e)
Common Equity	\$ _____	_____ %	_____ %	_____ %
Preferred Stock	_____	_____ %	_____ %	_____ %
Long Term Debt	_____	_____ %	_____ %	_____ %
Customer Deposits	_____	_____ %	_____ %	_____ %
Tax Credits - Zero Cost	_____	_____ %	0.00 %	_____ %
Tax Credits - Weighted Cost	_____	_____ %	_____ %	_____ %
Deferred Income Taxes	_____	_____ %	_____ %	_____ %
Other (Explain)	_____	_____ %	_____ %	_____ %
Total	\$ _____	100.00 %		_____ %

(1) Must be calculated using the same methodology used to calculate AFUDC rate approved by the Commission.

APPROVED AFUDC RATE

Current Commission approved AFUDC rate: _____ %
Commission Order Number approving AFUDC rate: _____

**WATER
OPERATING
SECTION**

UTILITY NAME: RIVER GROVE UTILITIES, INC
No Water Plant(Purchased Water Only)

YEAR OF REPORT DECEMBER 31, 2020

WATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
301	Organization_____	\$ 0	\$ 0	\$ 0	\$ 0
302	Franchises_____	_____	_____	_____	_____
303	Land and Land Rights_____	_____	_____	_____	_____
304	Structures and Improvements_____	_____	_____	_____	_____
305	Collecting and Impounding Reservoirs_____	_____	_____	_____	_____
306	Lake, River and Other Intakes_____	_____	_____	_____	_____
307	Wells and Springs_____	_____	_____	_____	_____
308	Infiltration Galleries and Tunnels_____	_____	_____	_____	_____
309	Supply Mains_____	_____	_____	_____	_____
310	Power Generation Equipment_____	_____	_____	_____	_____
311	Pumping Equipment_____	_____	_____	_____	_____
320	Water Treatment Equipment_____	_____	_____	_____	_____
330	Distribution Reservoirs and Standpipes_____	_____	_____	_____	_____
331	Transmission and Distribution Lines_____	_____	_____	_____	_____
333	Services_____	_____	_____	_____	_____
334	Meters and Meter Installations_____	_____	_____	_____	_____
335	Hydrants_____	_____	_____	_____	_____
336	Backflow Prevention Devices_____	_____	_____	_____	_____
339	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
340	Office Furniture and Equipment_____	_____	_____	_____	_____
341	Transportation Equipment_____	_____	_____	_____	_____
342	Stores Equipment_____	_____	_____	_____	_____
343	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
344	Laboratory Equipment_____	_____	_____	_____	_____
345	Power Operated Equipment_____	_____	_____	_____	_____
346	Communication Equipment_____	_____	_____	_____	_____
347	Miscellaneous Equipment_____	_____	_____	_____	_____
348	Other Tangible Plant_____	_____	_____	_____	_____
	Total Water Plant_____	\$ _____	\$ _____	\$ _____	\$ _____

UTILITY NAME: RIVER GROVE UTILITIES, INC

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOU

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	
304	Structures and Improvements		%	%	\$	\$
305	Collecting and Impounding Reservoirs		%	%		
306	Lake, River and Other Intakes		%	%		
307	Wells and Springs		%	%		
308	Infiltration Galleries & Tunnels		%	%		
309	Supply Mains		%	%		
310	Power Generating Equipment		%	%		
311	Pumping Equipment		%	%		
320	Water Treatment Equipment		%	%		
330	Distribution Reservoirs & Standpipes		%	%		
331	Trans. & Dist. Mains		%	%		
333	Services		%	%		
334	Meter & Meter Installations		%	%		
335	Hydrants		%	%		
336	Backflow Prevention Devices		%	%		
339	Other Plant and Miscellaneous Equipment		%	%		
340	Office Furniture and Equipment		%	%		
341	Transportation Equipment		%	%		
342	Stores Equipment		%	%		
343	Tools, Shop and Garage Equipment		%	%		
344	Laboratory Equipment		%	%		
345	Power Operated Equipment		%	%		
346	Communication Equipment		%	%		
347	Miscellaneous Equipment		%	%		
348	Other Tangible Plant		%	%		
	Totals				\$	\$

* This amount should tie to Sheet F-5.

UTILITY NAME: RIVER GROVE UTILITIES, INC

YEAR OF REPORT DECEMBER 31, 2020

WATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
601	Salaries and Wages - Employees _____	\$ 0
603	Salaries and Wages - Officers, Directors, and Majority Stockholders _____	0
604	Employee Pensions and Benefits _____	0
610	Purchased Water _____	11253
615	Purchased Power _____	0
616	Fuel for Power Production _____	0
618	Chemicals _____	0
620	Materials and Supplies _____	
630	Contractual Services:	
	Billing _____	33
	Professional _____	130
	Testing _____	0
	Other _____ METER READING	2828
640	Rents _____	0
650	Transportation Expense _____	0
655	Insurance Expense _____	0
665	Regulatory Commission Expenses (Amortized Rate Case Expense) _____	0
670	Bad Debt Expense _____	0
675	Miscellaneous Expenses _____ ASSESSMENT FEE	587.81
	Total Water Operation And Maintenance Expense _____	\$ 23579

* This amount should tie to Sheet F-3.

WATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Meter Equivalents (c x e) (f)
			Start of Year (d)	End of Year (e)	
Residential Service					
5/8"	D	1.0	179	179	179
3/4"	D	1.5	0	0	0
1"	D	2.5	0	0	0
1 1/2"	D,T	5.0	0	0	0
General Service					
5/8"	D	1.0	0	0	0
3/4"	D	1.5	0	0	0
1"	D	2.5	0	0	0
1 1/2"	D,T	5.0	0	0	0
2"	D,C,T	8.0	0	0	0
3"	D	15.0	0	0	0
3"	C	16.0	0	0	0
3"	T	17.5	0	0	0
Unmetered Customers			0	0	0
Other (Specify)			0	0	0
** D = Displacement C = Compound T = Turbine					
Total			<u>179</u>	<u>179</u>	<u>179</u>

UTILITY NAME: _____ RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31,2020

SYSTEM NAME: _____ RIVER GROVE UTILITIES INC

PUMPING AND PURCHASED WATER STATISTICS

(a)	Water Purchased For Resale (Omit 000's) (b)	Finished Water From Wells (Omit 000's) (c)	Recorded Accounted For Loss Through Line Flushing Etc. (Omit 000's) (d)	Total Water Pumped And Purchased (Omit 000's) [(b)+(c)-(d)] (e)	Water Sold To Customers (Omit 000's) (f)
January_____	_____	_____	_____	_____	_____
February_____	_____	_____	_____	_____	_____
March_____	_____	_____	_____	_____	_____
April_____	_____	_____	_____	_____	_____
May_____	_____	_____	_____	_____	_____
June_____	_____	_____	_____	_____	_____
July_____	_____	_____	_____	_____	_____
August_____	_____	_____	_____	_____	_____
September_____	_____	_____	_____	_____	_____
October_____	_____	_____	_____	_____	_____
November_____	_____	_____	_____	_____	_____
December_____	_____	_____	_____	_____	_____
Total for Year_____	_____	_____	_____	_____	_____

If water is purchased for resale, indicate the following:

Vendor _____ BAREFOOT BAY UTILITIES,INC
 Point of delivery _____ ENTRANCE TO MOBILE HOME PARK

If water is sold to other water utilities for redistribution, list names of such utilities below:

NONE

MAINS (FEET)

Kind of Pipe (PVC, Cast Iron, Coated Steel, etc.)	Diameter of Pipe	First of Year	Added	Removed or Abandoned	End of Year
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

UTILITY NAME: _____ RIVER GROVE UTILITIES, INC.

YEAR OF REPORT DECEMBER 31, 2020

SYSTEM NAME: _____ RIVER GROVE UTILITIES, INC

WELLS AND WELL PUMPS
NO WELLS

(a)	(b)	(c)	(d)	(e)
Year Constructed _____	_____	_____	_____	_____
Types of Well Construction and Casing _____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Depth of Wells _____	_____	_____	_____	_____
Diameters of Wells _____	_____	_____	_____	_____
Pump - GPM _____	_____	_____	_____	_____
Motor - HP _____	_____	_____	_____	_____
Motor Type * _____	_____	_____	_____	_____
Yields of Wells in GPD _____	_____	_____	_____	_____
Auxiliary Power _____	_____	_____	_____	_____
* Submersible, centrifugal, etc.				

RESERVOIRS

(a)	(b)	(c)	(d)	(e)
Description (steel, concrete)	_____	_____	_____	_____
Capacity of Tank _____	_____	_____	_____	_____
Ground or Elevated _____	_____	_____	_____	_____

HIGH SERVICE PUMPING

(a)	(b)	(c)	(d)	(e)
<u>Motors</u>				
Manufacturer _____	_____	_____	_____	_____
Type _____	_____	_____	_____	_____
Rated Horsepower _____	_____	_____	_____	_____
<u>Pumps</u>				
Manufacturer _____	_____	_____	_____	_____
Type _____	_____	_____	_____	_____
Capacity in GPM _____	_____	_____	_____	_____
Average Number of Hours Operated Per Day _____	_____	_____	_____	_____
Auxiliary Power _____	_____	_____	_____	_____

UTILITY NAME: _____ RIVER GROVE UTILITIES, INC

YEAR OF REPORT DECEMBER 31, 2020

SOURCE OF SUPPLY

List for each source of supply (Ground, Surface, Purchased Water etc.)			
Permitted Gals. per day _____	_____	_____	_____
Type of Source _____	PURCHASED _____	_____	_____

WATER TREATMENT FACILITIES

List for each Water Treatment Facility:			
Type _____	_____	_____	_____
Make _____	_____	_____	_____
Permitted Capacity (GPD) _____	_____	_____	_____
High service pumping	_____	_____	_____
Gallons per minute _____	_____	_____	_____
Reverse Osmosis _____	_____	_____	_____
Lime Treatment	_____	_____	_____
Unit Rating _____	_____	_____	_____
Filtration	_____	_____	_____
Pressure Sq. Ft. _____	_____	_____	_____
Gravity GPD/Sq.Ft. _____	_____	_____	_____
Disinfection	_____	_____	_____
Chlorinator _____	_____	_____	_____
Ozone _____	_____	_____	_____
Other _____	_____	_____	_____
Auxiliary Power _____	_____	_____	_____

UTILITY NAME: ___ RIVER GROVE UTILITIES, INC

YEAR OF REPORT
DECEMBER 31, ___

SYSTEM NAME: ___ RIVER GROVE UTILITIES, INC

GENERAL WATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present ERC's * the system can efficiently serve. _____ 179

RCs * which can be served. _____ 179

3. Present system connection capacity (in ERCs *) using existing lines. _____ 179

4. Future connection capacity (in ERCs *) upon service area buildout. _____ 179

5. Estimated annual increase in ERCs *. _____ 0

6. Is the utility required to have fire flow capacity? _____ NO
If so, how much capacity is required? _____ UNKNOWN

7. Attach a description of the fire fighting facilities. ONE HYDRANT

8. Describe any plans and estimated completion dates for any enlargements or improvements of this system.
NONE

9. When did the company last file a capacity analysis report with the DEP? ___ 2020

10. If the present system does not meet the requirements of DEP rules, submit the following:

a. Attach a description of the plant upgrade necessary to meet the DEP rules.

b. Have these plans been approved by DEP? _____ NO PLANS

c. When will construction begin? _____ N/A

d. Attach plans for funding the required upgrading.

e. Is this system under any Consent Order with DEP? _ NO

11. Department of Environmental Protection ID # _____ NONE

12. Water Management District Consumptive Use Permit # UNKNOWN

a. Is the system in compliance with the requirements of the CUP? _____ N/A

b. If not, what are the utility's plans to gain compliance? _____ N/A

* An ERC is determined based on one of the following methods:

(a) If actual flow data are available from the preceding 12 months:

Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:

ERC = (Total SFR gallons sold (omit 000/365 days/350 gallons per day).

WASTEWATER
OPERATING
SECTION

UTILITY NAME: RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31,2020

WASTEWATER UTILITY PLANT ACCOUNTS

Acct. No. (a)	Account Name (b)	Previous Year (c)	Additions (d)	Retirements (e)	Current Year (f)
351	Organization_____	\$ _____	\$ _____	\$ _____	\$ _____
352	Franchises_____	_____	_____	_____	_____
353	Land and Land Rights_____	_____	_____	_____	_____
354	Structures and Improvements_____	_____	_____	_____	_____
355	Power Generation Equipment_____	_____	_____	_____	_____
360	Collection Sewers - Force_____	_____	_____	_____	_____
361	Collection Sewers - Gravity_____	_____	_____	_____	_____
362	Special Collecting Structures_____	_____	_____	_____	_____
363	Services to Customers_____	_____	_____	_____	_____
364	Flow Measuring Devices_____	_____	_____	_____	_____
365	Flow Measuring Installations_____	_____	_____	_____	_____
370	Receiving Wells_____	_____	_____	_____	_____
371	Pumping Equipment_____	_____	_____	_____	_____
380	Treatment and Disposal Equipment_____	_____	_____	_____	_____
381	Plant Sewers_____	_____	_____	_____	_____
382	Outfall Sewer Lines_____	_____	_____	_____	_____
389	Other Plant and Miscellaneous Equipment_____	_____	_____	_____	_____
390	Office Furniture and Equipment_____	_____	_____	_____	_____
391	Transportation Equipment_____	_____	_____	_____	_____
392	Stores Equipment_____	_____	_____	_____	_____
393	Tools, Shop and Garage Equipment_____	_____	_____	_____	_____
394	Laboratory Equipment_____	_____	_____	_____	_____
395	Power Operated Equipment_____	_____	_____	_____	_____
396	Communication Equipment_____	_____	_____	_____	_____
397	Miscellaneous Equipment_____	_____	_____	_____	_____
398	Other Tangible Plant_____	_____	_____	_____	_____
	Total Wastewater Plant_____	\$ _____	\$ _____	\$ _____	\$ _____*

* This amount should tie to sheet F-5.

UTILITY NAME: RIVER GROVE UTILITIES

ANALYSIS OF ACCUMULATED DEPRECIATION BY PRIMARY ACCOU

Acct. No. (a)	Account (b)	Average Service Life in Years (c)	Average Salvage in Percent (d)	Depr. Rate Applied (e)	Accumulated Depreciation Balance Previous Year (f)	
354	Structures and Improvements		%	%	\$	\$
355	Power Generation Equipment		%	%		
360	Collection Sewers - Force		%	%		
361	Collection Sewers - Gravity		%	%		
362	Special Collecting Structures		%	%		
363	Services to Customers		%	%		
364	Flow Measuring Devices		%	%		
365	Flow Measuring Installations		%	%		
370	Receiving Wells		%	%		
371	Pumping Equipment		%	%		
380	Treatment and Disposal Equipment		%	%		
381	Plant Sewers		%	%		
382	Outfall Sewer Lines		%	%		
389	Other Plant and Miscellaneous Equipment		%	%		
390	Office Furniture and Equipment		%	%		
391	Transportation Equipment		%	%		
392	Stores Equipment		%	%		
393	Tools, Shop and Garage Equipment		%	%		
394	Laboratory Equipment		%	%		
395	Power Operated Equipment		%	%		
396	Communication Equipment		%	%		
397	Miscellaneous Equipment		%	%		
398	Other Tangible Plant		%	%		
	Totals				\$	\$

* This amount should tie to Sheet F-5.

UTILITY NAME: ___ RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31, 2020

WASTEWATER OPERATION AND MAINTENANCE EXPENSE

Acct. No.	Account Name	Amount
701	Salaries and Wages - Employees_____	\$ _____
703	Salaries and Wages - Officers, Directors, and Majority Stockholders_____	_____
704	Employee Pensions and Benefits_____	_____
710	Purchased Wastewater Treatment_____	_____
711	Sludge Removal Expense_____	_____
715	Purchased Power_____	_____
716	Fuel for Power Production_____	_____
718	Chemicals_____	_____
720	Materials and Supplies_____	_____
730	Contractual Services:	
	Billing_____	_____
	Professional_____	_____
	Testing_____	_____
	Other_____	_____
740	Rents_____	_____
750	Transportation Expense_____	_____
755	Insurance Expense_____	_____
765	Regulatory Commission Expenses (Amortized Rate Case Expense)_____	_____
770	Bad Debt Expense_____	_____
775	Miscellaneous Expenses_____	_____
	Total Wastewater Operation And Maintenance Expense_____	\$ _____

* This amount should tie to Sheet F-3.

WASTEWATER CUSTOMERS

Description (a)	Type of Meter ** (b)	Equivalent Factor (c)	Number of Active Customers		Total Number of Equivalent Customer (c x e) (f)
			Start of Year (d)	End of Year (e)	
Residential Service					
All meter sizes	D	1.0	179	179	179
General Service					
5/8"	D	1.0			
3/4"	D	1.5			
1"	D	2.5			
1 1/2"	D,T	5.0			
2"	D,C,T	8.0			
3"	D	15.0			
3"	C	16.0			
3"	T	17.5			
Unmetered Customers					
Other (Specify)					
** D = Displacement C = Compound T = Turbine			Total	179	179

UTILITY NAME: _____ RIVER GROVE UTILITIES INC

YEAR OF REPORT
DECEMBER 31, 2021

PUMPING EQUIPMENT

Lift Station Number _____	1	2	3	_____	_____
Make or Type and nameplate data on pump _____	GOULDS	GOULDS	GOULDS	_____	_____
Year installed _____	2020	2018	2020	_____	_____
Rated capacity _____	1HP	1HP	1HP	_____	_____
Size _____	1HP	1HP	1HP	_____	_____
Power:					
Electric _____	230 V	230 V	230 V	_____	_____
Mechanical _____	_____	_____	_____	_____	_____
Nameplate data of motor _____	GOULDS 3 PHASE	GOULDS 3 PHASE	GOULDS 3 PHASE	_____	_____

SERVICE CONNECTIONS

1 LIFT STATION IS PUMPED TO 2 LIFT STATION THEN TO SEWER PLANT

Size (inches) _____	3	3	3	_____	_____
Type (PVC, VCP, etc.) _____	PVC	PVC	PVC	_____	_____
Average length _____	10 FT	10 FT	10 FT	_____	_____
Number of active service connections _____	99	80	179	_____	_____
Beginning of year _____	99	80	179	_____	_____
Added during year _____	0	0	0	_____	_____
Retired during year _____	0	0	0	_____	_____
End of year _____	99	80	179	_____	_____
Give full particulars concerning inactive connections _____	0	0	0	_____	_____

COLLECTING AND FORCE MAINS

	Collecting Mains				Force Mains		
Size (inches) _____	6 INCH	_____	_____	_____	_____	_____	_____
Type of main _____	PVC	_____	_____	_____	_____	_____	_____
Length of main (nearest foot) _____	_____	_____	_____	_____	_____	_____	_____
Beginning of year _____	_____	_____	_____	_____	_____	_____	_____
Added during year _____	_____	_____	_____	_____	_____	_____	_____
Retired during year _____	_____	_____	_____	_____	_____	_____	_____
End of year _____	_____	_____	_____	_____	_____	_____	_____

MANHOLES

Size (inches) _____	_____	_____	_____	_____
Type of Manhole _____	_____	_____	_____	_____
Number of Manholes:				
Beginning of year _____	12	_____	_____	_____
Added during year _____	_____	_____	_____	_____
Retired during year _____	_____	_____	_____	_____
End of Year _____	12	_____	_____	_____

UTILITY NAME: _____ RIVER GROVE UTILITIES, INC

SYSTEM NAME: _____ RIVER GROVE UTILITIES INC

YEAR OF REPORT DECEMBER 31, 2020

TREATMENT PLANT

Manufacturer _____ Type _____ "Steel" or "Concrete" _____ Total Permitted Capacity _____ Average Daily Flow _____ Method of Effluent Disposal _____ Permitted Capacity of Disposal _____ Total Gallons of Wastewater treated _____	EXTENDED AERATION CONCRETE 3-PONDS	_____ _____ _____ _____ _____ _____ _____	_____ _____ _____ _____ _____ _____ _____
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------	-------------------------------------------------------------	-------------------------------------------------------------

MASTER LIFT STATION PUMPS

Manufacturer _____ Capacity (GPM's) _____ Motor: Manufacturer _____ Horsepower _____ Power (Electric or Mechanical) _____	_____ _____ 1 HP ELECTRIC	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____
------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------	----------------------------------	----------------------------------	----------------------------------	----------------------------------

PUMPING WASTEWATER STATISTICS

Months	Gallons of Treated Wastewater	Effluent Reuse Gallons to Customers	Effluent Gallons Disposed of on site
January _____	_____	_____	_____
February _____	_____	_____	_____
March _____	_____	_____	_____
April _____	_____	_____	_____
May _____	_____	_____	_____
June _____	_____	_____	_____
July _____	_____	_____	_____
August _____	_____	_____	_____
September _____	_____	_____	_____
October _____	_____	_____	_____
November _____	_____	_____	_____
December _____	_____	_____	_____
Total for year _____	_____	_____	_____

If Wastewater Treatment is purchased, indicate the vendor: _____

UTILITY NAME: RIVER GROVE UTILITIES INC

YEAR OF REPORT
DECEMBER 31,

SYSTEM NAME RIVER GROVE UTILITIES INC

GENERAL WASTEWATER SYSTEM INFORMATION

Furnish information below for each system. A separate page should be supplied where necessary.

1. Present number of ERCs* now being served. _____
2. Maximum number of ERCs* which can be served. _____
3. Present system connection capacity (in ERCs*) using existing lines. _____
4. Future connection capacity (in ERCs*) upon service area buildout. _____
5. Estimated annual increase in ERCs*. _____
6. Describe any plans and estimated completion dates for any enlargements or improvements of this system

7. If the utility uses reuse as a means of effluent disposal, provide a list of the reuse end users and the amount of reuse provided to each, if known.
8. If the utility does not engage in reuse, has a reuse feasibility study been completed? _____
If so, when? _____
9. Has the utility been required by the DEP or water management district to implement reuse? _____ NO
If so, what are the utility's plans to comply with this requirement? _____

10. When did the company last file a capacity analysis report with the DEP? _____
11. If the present system does not meet the requirements of DEP rules, submit the following:
 - a. Attach a description of the plant upgrade necessary to meet the DEP rules.
 - b. Have these plans been approved by DEP? _____
 - c. When will construction begin? _____
 - d. Attach plans for funding the required upgrading.
 - e. Is this system under any Consent Order with DEP? _____
12. Department of Environmental Protection ID # _____

* An ERC is determined based on one of the following methods:
(a) If actual flow data are available from the preceding 12 months:
Divide the total annual single family residence (SFR) gallons sold by the average number of single family residents (SFR) gallons sold by the average number of single family residence customers for the same period and divide the result by 365 days.

(b) If no historical flow data are available use:
ERC = (Total SFR gallons sold (omit 000/365 days/280 gallons per day).

UTILITY NAME: RIVER GROVE UTILITIES INC

YEAR OF REPORT
DECEMBER 31, 2020

CERTIFICATION OF ANNUAL REPORT

4

I HEREBY CERTIFY, to the best of my knowledge and belief:

- | | | | |
|--------------------------------------------|--------------------------------|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 1. | The utility is in substantial compliance with the Uniform System of Accounts prescribed by the Florida Public Service Commission in Rule 25-30.115 (1), Florida Administrative Code. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 2. | The utility is in substantial compliance with all applicable rules and orders of the Florida Public Service Commission. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 3. | There have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in, financial reporting practices that could have a material effect on the financial statement of the utility. |
| YES
<input checked="" type="checkbox"/> | NO
<input type="checkbox"/> | 4. | The annual report fairly represents the financial condition and results of operations of the respondent for the period presented and other information and statements presented in the report as to the business affairs of the respondent are true, correct, and complete for the period for which it represents. |

Items Certified

1. 2. 3. 4.


(signature of chief executive officer of the utility) *

Date:

2-4-22

1. 2. 3. 4.

(signature of chief financial officer of the utility) *

Date:

* Each of the four items must be certified YES or NO. Each item need not be certified by both officers. The items being certified by the officer should be indicated in the appropriate area to the left of the signature.

Notice: Section 837.06, Florida Statutes, provides that any person who knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his duty shall be guilty of a misdemeanor of the second degree.