

FLORIDA UTILITY SERVICES 1, LLC  
5911 TROUBLE CREEK RD.  
NEW PORT RICHEY, FL. 34652  
863-904-5574

October 20, 2020

Commission Clerk  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL. 32399

Check received with filing and forwarded  
to Fiscal for deposit. Fiscal to forward  
deposit information to Records.

Initials of person who forwarded check:

JS

RE: Application for a staff assisted rate case for Sunny shores  
Utilities, LLC in Manatee County.

Dear Commission Clerk:

Enclosed please find an application for a staff assisted rate  
case for sunny Shores utilities in Manatee County.

In this docket the utility requests the following:

1. A customer deposit
2. A meter tampering Fee
3. A request to replace 35 customer meters and boxes per year.
4. Removal or reclassification of the backflow maintenance fee. For  
this fee, the previous owner had contracted with a company to  
inspect the customers backflow devises. I am choosing to change  
this method, as these backflow devises are the property of the  
customer and I feel the customer should have them inspect  
independent of the utility. Utility personal will conduct a  
physical inspection once per year to verify all backflow devises  
are current with inspections and in working order.

On behalf of the company,



Mike Smallridge.

RECEIVED--FPSC  
2020 OCT 21 PM 1:01  
COMMISSION  
CLERK



- G. List of Associated Companies and Addresses:  
**HOLIDAY GARDENS UTILITIES, LLC- PASCO COUNTY**  
**CRESTRIDGE UTILITIES, LLC-PASCO COUNTY**  
**WEST LAKELAND WASTEWATER, INC- POLK COUNTY**

H. If you have retained an attorney and/or a consultant to represent the utility for this application, furnish the name(s) and address(es):

Name:

Address:

**II. ACCOUNTING DATA**

A. Outside Accountant

1. Name:
2. Firm:
3. Address:
4. Telephone: (    )

B. Individual To Contact On Accounting Matters:

1. Name:        **MIKE SMALLRIDGE**
2. Telephone: 352-302-7406

C. Location of Books and Records:    **UTILITY OFFICE**

D. Have you filed an Annual Report with the Commission? X  Yes     No

Date Last Filed:    **2019**

E. Has your latest Regulatory Assessment Fee Payment been made? YES  
 (January 30 or July 30 whichever is applicable) X  Jan 30     July 30

F. Basic Rate Base Data: (Most recent two years)

1. Water:

	<b>2019</b>	
Cost of Plant In Service	\$ <b>26,775</b>	\$ _____
Less Accumulated Depreciation	<u>7360</u>	<u>                    </u>
Less Contributed Plant	<u>                    </u>	<u>                    </u>
Net Owner's Investment	<b>\$ 37,644</b>	<b>\$</b>

2. Wastewater:

Cost of Plant In Service	\$ _____	\$ _____
Less Accumulated Depreciation	_____	_____
Less Contributed Plant	_____	_____
Net Owner's Investment	\$ _____	\$ _____

G. Basic Income Statement: (Most recent two years)

1. Water:

	<b>2019</b>	
Revenues (By Class)		
a. <b>RESIDENTIAL</b>	\$ <b>86,929</b>	\$ _____
b. <b>GENERAL SERVICES</b>	<b>2,078</b>	_____
c. <b>OTHER</b>	<b>4,250</b>	_____
Total Operating Revenues:	\$ <b>93,257</b>	\$ _____
Less Expenses:		
a. Salaries & Wages – Employees	13,810	_____
b. Salaries & Wages - Officers, Directors, & Majority Stockholders	<b>3164</b>	_____
c. Employee Pensions & Benefits	<b>238</b>	_____
d. Purchased Water	<b>33,286</b>	_____
e. Purchased Power	_____	_____
f. Fuel for Power Production	_____	_____
g. Chemicals	_____	_____
h. Materials & Supplies	<b>3,386</b>	_____
i. Contractual Services	<b>9113</b>	_____
j. Rents	<b>1647</b>	_____
k. Transportation Expenses	<b>4566</b>	_____
l. Insurance Expense	<b>1248</b>	_____
m. Regulatory Commission Expense	_____	_____
n. Bad Debt Expense	<b>7</b>	_____
o. Miscellaneous Expense	<b>15,311</b>	_____
p. Depreciation Expense	<b>774</b>	_____
q. Property Taxes	<b>0</b>	_____
r. Other Taxes	<b>5277</b>	_____
s. Income Taxes	_____	_____
Operating Income (Loss)	\$ <b>91827</b>	\$ _____



III

**ENGINEERING DATA**

A. Outside Engineering Consultant:

- 1. Name:
- 2. Firm:
- 3. Address:
- 4. Telephone: ( )

B. Individual to contact on engineering matters:

- 1. Name: **MICHAEL SMALLRIDGE**
- 2. Telephone: **(352) 302 7406**

C. Is the utility under citation by the Department of Environmental Protection (DEP) or County Health Department?  
If yes, explain: **NO**

D. List any known service deficiencies and steps taken to remedy problems: **NONE**

E. Name of plant operator(s) and DEP operator certificate number(s) held:

F. Is the utility serving customers outside of its certificated area? **NO**  
If yes, explain:

G. Wastewater:

1. Gallons per day capacity of treatment facilities:

- a. Existing:
- b. Under Construction:
- c. Proposed:

2. Type and make of present treatment facilities:

3. Approximate average daily flow of treatment plant effluent:

4. Approximate length of wastewater mains:

Size (diameter):					
Linear feet:					

5. Number of manholes:

6. Number of lift stations:

7. How do you measure treatment plant effluent?

8. Is the treatment plant effluent chlorinated? Yes  No





**V. AFFIRMATION**

I, **MICHAEL SMALLRIDGE** the undersigned owner, officer, or partner of the above named public utility, doing business in the State of Florida and subject to the control and jurisdiction of the Florida Public Service Commission, certify that the statements set forth herein are true and correct to the best of my information, knowledge, and belief.

Signed 

Title managing Member

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.

GENERAL SERVICE

RATE SCHEDULE (GS)

- AVAILABILITY - Available throughout the area served by the Company.
- APPLICABILITY - For water service to all Customers for which no other schedule applies.
- LIMITATIONS - Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD - Quarterly
- RATE -
- |                                      |         |
|--------------------------------------|---------|
| <u>All Meter Sizes</u>               |         |
| Base Facility Charge                 | \$74.97 |
| Includes 10,800 gallons              |         |
| Charge per 1,000 over 10,800 gallons | \$5.14  |
- MINIMUM CHARGE - Base Facility Charge
- TERMS OF PAYMENT - Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE - August 18, 2020

TYPE OF FILING - Transfer

WS-2020-0073

MICHAEL SMALLRIDGE  
ISSUING OFFICER

MANAGING MEMBER  
TITLE

RESIDENTIAL SERVICE

RATE SCHEDULE (RS)

- AVAILABILITY – Available throughout the area served by the Company.
- APPLICABILITY – For water service for all purposes in private residences and individually metered apartment units.
- LIMITATIONS – Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD – Quarterly
- RATE –
- |                                      |         |
|--------------------------------------|---------|
| <u>All Meter Sizes</u>               |         |
| Base Facility Charge                 | \$74.97 |
| Includes 10,800 gallons              |         |
| Charge per 1,000 over 10,800 gallons | \$5.14  |
- MINIMUM CHARGE – Base Facility Charge
- TERMS OF PAYMENT – Bills are due and payable when rendered. In accordance with Rule 25-30.320, Florida Administrative Code, if a Customer is delinquent in paying the bill for water service, service may then be discontinued.

EFFECTIVE DATE – August 18, 2020

TYPE OF FILING – Transfer

BACKFLOW MAINTENANCE SERVICE CHARGE

RATE SCHEDULE (BMSC)

- AVAILABILITY – Available throughout the area served by the Company.
- APPLICABILITY – The Company may charge for the service of inspection/certification of backflow prevention devices under Manatee County Rule 187-25 and the Department of Environmental Protection Rules 62-555.330 and 62-555.360 Florida Administrative Code.
- LIMITATIONS – Subject to all of the Rules and Regulations of this Tariff and General Rules and Regulations of the Commission.
- BILLING PERIOD – Advanced quarterly billing (January 1, April 1, July 1, October 1)
- RATE – \$5.46

EFFECTIVE DATE – August 18, 2020

TYPE OF FILING – Transfer

WS-2020-0073

MICHAEL SMALLRIDGE  
ISSUING OFFICER

MANAGING MEMBER  
TITLE