

Gas Municipal or Gas District Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

(See Filing Instructions on Back of Form)

☐ Actual Return
☐ Estimated Return
☐ Amended Return

PERIOD COVERED:

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # _____
 \$ _____ 06-01-002
 003001
 \$ _____ E
 \$ _____ P 06-01-002
 \$ _____ I 004011
 Postmark Date _____
 Initials of Preparer _____

(Name of Utility)

(Address)

(City/State)

(Zip)

LINE

NO.

ACCOUNT CLASSIFICATION

AMOUNT

1.	Gas Service Revenues	\$ _____
2.	Other Operating Revenues	_____
3.	Other Gas Revenues	_____
4.	TOTAL GROSS REVENUES	\$ _____
5.	Less:	
6.	Sales For Resale	(_____)
7.	Sales For Electric Generation To Electric Cooperatives, Municipalities, and Investor-Owned Utilities	(_____)
8.	Revenues Subject to Regulatory Assessment Fee	_____
9.	Regulatory Assessment Fee Rate	0.001919
10.	Regulatory Assessment Fee Due (Line 8 x Line 9) ⁽¹⁾	_____
11.	Penalty For Late Payment (see #3 on back)	_____
12.	Interest For Late Payment (see #3 on back)	_____
13.	Extension Payment Fee (see #4 on back)	_____
14.	TOTAL AMOUNT DUE	\$ _____

⁽¹⁾As provided in section 350.113, Florida Statutes, the **Minimum Annual Fee is \$25** (see Item #5 on back)**THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED**

I, the undersigned owner/officer of the above-named vendor, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

(Signature of Utility Official)

(Title)

(Date)

(Please Print Name)

Telephone Number () _____ Email/Fax Number () _____

F.E.I. No. _____

FLORIDA PUBLIC SERVICE COMMISSION

Instructions For Filing Regulatory Assessment Fee Return (Gas Municipal and Gas District)

1. **WHEN TO FILE:** To avoid payment of penalties and interest, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

*On or before July 30 for the six-month period January 1 through June 30, and
On or before January 30 for the six-month period July 1 through December 31.*

However, if July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee Return may be filed or postmarked on the next business day, without penalty.

2. **FEES:** Each utility ~~must shall~~ pay the currently authorized percentage, as indicated on Line 9 on the reverse side, of its gross operating revenues derived from intrastate business. Gross Operating Revenues are defined as the total revenues before expenses. The currently authorized percentage was implemented by Section 25-7.0131(1)(b), Florida Administrative Code.
3. **FAILURE TO FILE BY DUE DATE:** A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due. Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 11). In addition, interest ~~will shall~~ be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 12).
4. **EXTENSION:** A utility, for good cause shown in a written request, may be granted up to a 30-day extension. A request must be made by filing the enclosed *Regulatory Assessment Fee Extension Request* form (PSC 1037) (~~PSC/ALT-124~~), two weeks prior to the filing date. If an extension is granted, a charge ~~will shall~~ be added to the amount due:

0.75% of the fee *to* be remitted for an extension of 15 days or less, *or*
1.5% of the fee for *an* extension of 16 to 30 days.

In lieu of paying the charges outlined above, a utility may file a return and remit payment based upon estimated gross operating revenues by checking the "Estimated Return" space in the top left-hand corner on the reverse side. If such return is filed by the normal due date, the utility ~~will shall~~ be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period.

5. **REGULATORY ASSESSMENT FEE DUE:** Amounts are due and payable to the Commission by either January 30 or July 30 depending on the reporting period. If there are no revenues **OR** if revenues are insufficient to generate a minimum annual fee, remit the minimum fee. **A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.**
6. **FEE ADJUSTMENTS:** The utility will be notified as to the amount and reason for any adjustment. Penalty and interest charges may be applicable to additional amounts owed to the Commission by reason of the adjustment. A utility may file a written request for a refund of any overpayments. The request should be directed to Fiscal Services at the below-referenced address.
7. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your file, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. If you are unable to use the enclosed envelope, please address your remittance as follows:

Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

ATTENTION: Fiscal Services

8. **ADDITIONAL ASSISTANCE:** If any additional assistance is required in preparing the Regulatory Assessment Fee Return, please contact the Division of ~~Economics Accounting and Finance~~ at (850) 413-6410 (~~850-413-6900~~) or at the above-referenced address, directing correspondence to the attention of the division.