

Large Wastewater Utility Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

☐ Actual Return
☐ Estimated Return
☐ Amended Return

PERIOD COVERED:

(See Filing Instructions on Back of Form)

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check # _____
 \$ _____ 0604002
 _____ 003001
 \$ _____ E
 \$ _____ P 0604002
 _____ 004011
 \$ _____ I
 Postmark Date _____
 Initials of Preparer _____

(Name of Utility)	(Address)	(City/State)	(Zip)
Florida Public Service Commission Certificate	# _____	# _____	# _____
WASTEWATER OPERATING REVENUES			
FLAT-RATE REVENUES			
1. Residential Revenues (521.1)	\$ _____	\$ _____	\$ _____
2. Commercial Revenues (521.2)	_____	_____	_____
3. Industrial Revenues (521.3)	_____	_____	_____
4. Revenues from Public Authorities (521.4)	_____	_____	_____
5. Multiple Family Dwelling Revenues (521.5)	_____	_____	_____
6. Other Revenues (521.6)	_____	_____	_____
7. TOTAL FLAT-RATE REVENUES	\$ _____	\$ _____	\$ _____
MEASURED REVENUES			
8. Residential Revenues (522.1)	_____	_____	_____
9. Commercial Revenues (522.2)	_____	_____	_____
10. Industrial Revenues (522.3)	_____	_____	_____
11. Revenues from Public Authorities (522.4)	_____	_____	_____
12. Multiple Family Dwelling Revenues (522.5)	_____	_____	_____
13. TOTAL MEASURED REVENUES	\$ _____	\$ _____	\$ _____
14. Revenues from Public Authorities (523)	_____	_____	_____
15. Revenues from Other Systems (524)	_____	_____	_____
16. Interdepartmental Revenues (525)	_____	_____	_____
17. TOTAL OPERATING REVENUES (Lines 7+13+14+15+16)	\$ _____	\$ _____	\$ _____
OTHER WASTEWATER REVENUES			
18. Guaranteed Revenues (Include Revenues from A.F.P.I. Charges) (530)	_____	_____	_____
19. Sales of Sludge (531)	_____	_____	_____
20. Forfeited Discounts (532)	_____	_____	_____
21. Rents from Wastewater Property (534)	_____	_____	_____
22. Interdepartmental Rents (535)	_____	_____	_____
23. Other Wastewater Revenues (536) Describe:	_____	_____	_____
Describe:	_____	_____	_____
24. TOTAL OTHER WASTEWATER REVENUES (Lines 18+19+20+21+22+23)	\$ _____	\$ _____	\$ _____
25. TOTAL WASTEWATER REVENUES (Lines 17+24)⁽¹⁾	\$ _____	\$ _____	\$ _____
26. Less: Expense for Purchased Wastewater Treatment from FPSC-Regulated Utility	(_____)	(_____)	(_____)
27. NET WASTEWATER REVENUES (Line 25 Less Line 26)	_____	_____	_____
REGULATORY ASSESSMENT FEE DUE – (Multiply Line 27 by 0.045)			
28. (If more than \$25, enter amount. If less, enter \$25) ⁽²⁾	_____	_____	_____
29. Less: Payment for January 1 – June 30 Period	(_____)	(_____)	(_____)
30. Less: Approved Prior-Period Credit	(_____)	(_____)	(_____)
31. NET REGULATORY ASSESSMENT FEE (See#11 on back)	\$ _____	\$ _____	\$ _____
32. Penalty for Late Payment (see “4. Failure to File by Due Date” on back)	_____	_____	_____
33. Interest for Late Payment (see “4. Failure to File by Due Date” on back)	_____	_____	_____
34. Extension Payment (see “5. Extension” on back)	_____	_____	_____
35. TOTAL AMOUNT DUE (Line 31+32+33+34)	\$ _____	\$ _____	\$ _____

⁽¹⁾These amounts must agree with Annual Report Schedule F-3⁽²⁾As provided in Section 350.113, Florida Statutes, the Minimum Annual Fee is \$25 (see Item #7 on back)

If service was purchased from a regulated utility, please insert its name: _____

AS PROVIDED IN SECTION 350.113, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$25

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 (Large Wastewater Utility)

1. **WHO MUST FILE:** Each large regulated utility under the jurisdiction of the Florida Public Service Commission (Commission) for any part of the 12-month period, January 1 through December 31, preceding the due date as reflected in the following paragraph. A large utility is defined as a utility with annual revenues of \$200,000 or more based on the most recent prior calendar year.
2. **WHEN TO FILE:** To avoid payment of penalties and interest, the Regulatory Assessment Fee Return form 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 may be filed or postmarked on the next business day, without penalty.

3. **FEES:** Each Commission-regulated utility must ~~shall~~ pay the presently established percentage (Line 28) of its gross operating revenues derived from intrastate business. (Gross Operating Revenues are defined as the total revenues before expenses.) To assure an accurate recording of your fee payment, it is most important that you identify each certificate number in the appropriate space.
4. **FAILURE TO FILE BY DUE DATE:** 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 31). 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 32).
5. **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/AT-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.

6. **AUTHORITY:** The authority to collect regulatory assessment fees is granted to the Commission by Section 350.113 and 367.145, Florida Statutes.
7. **REGULATORY ASSESSMENT FEE DUE:** Amounts are due and payable to the Commission by 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.**
8. **FEE ADJUSTMENTS:** Computation errors and/or differences in gross operating revenues reported for regulatory assessment fee purposes and those reported in the annual report may cause adjustments to amounts paid to the Commission. You will be notified as to the amount and reason for any adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission by reason of the adjustment.
9. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your files, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. However, if you are unable to use the envelope, please address your remittance as follows:

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

ATTENTION: Fiscal Services

10. **ADDITIONAL ASSISTANCE:** If you need additional information or assistance in preparing your 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 ~~changing the Attention line.~~
11. **AMOUNT OF REVENUES TO BE REPORTED:** For the January 1 through June 30 reporting period, the amount of gross operating revenues to be reported is for that period. However, for the July 1 through December 31 reporting period, the amount of gross operating revenues to be reported is for the entire 12-month period of January 1 through December 31. After calculating the regulatory assessment fee due for the 12-month period (Line 28), deduct the payment made for the January 1 through June 30 period (Line 29) to determine the TOTAL AMOUNT DUE (Line 34).