COMMONWEALTH OF KENTUCKY

BEFORE THE PUBLIC SERVICE COMMISSION

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In the Matter of:

AN ADJUSTMENT OF RATES IN THE)
EAST LOGAN WATER DISTRICT AND)
FOR AUTHORITY TO REAMORTIZE)
EXISTING BOND INDEBTEDNESS)

ORDER

shall file an original and 8 copies of the following information with this Commission, with a copy to all parties of record, by February 11, 1986, or within 2 weeks after the date of this Order, whichever is later. Include with each response the name of the witness who will be responsible for responding to questions relating to the information provided. Careful attention should be given to copied material to insure that it is legible. If neither the requested information nor a motion for an extension of time is filed by the stated date, the case may be dismissed.

- 1. The billing analysis using present rates produces annual revenue in the amount of \$162,056. The income statement for the test year shows operating revenue from water sales as \$168,725. Please reconcile the difference of \$6,669.
- 2. What was the total amount of uncollectibles during the test year?

- 3. Are all special charges and tap fees compensatory? If not, please provide cost justification for increasing said fees or charges using the attached forms.
- 4. In the 1984 Annual Report, East Logan classifies Organization Costs of \$71,171, net of amortization, under Deferred Debits. In the June 30, 1985, Report, organization costs of \$70,183 are shown as Other Assets. The Uniform System of Accounts for Water Utilities classifies Organization Costs as utility plant under the sub-account of Intangible Plant. Please explain East Logan's basis for this deviation.
- 5. Provide an amortization schedule for Organization Costs per the June 30, 1985, Report, including the following:
 - a. Description of the asset;
 - b. Date acquired;
 - c. Cost of the asset;
 - d. Amortization allowed or allowable in prior years;
 - e. Estimated life; and
 - f. Test-period amortization expense.
- 6. In numerous past cases, the Commission has disallowed depreciation on facilities provided through Contributions in Aid of Construction for rate-making purposes. Provide any evidence deemed necessary as to why this rate-making practice should not be applied in this case.
- 7. For each employee and commissioner provide the following information:
- a. A detailed description of the duties and responsibilities of each employee and commissioner.

- b. For each employee and commissioner, provide an analysis showing changes in the level of wages, and other compensation, from January 1, 1983, to the present, and include any proposed adjustments. The analysis should include an explanation for the change, the date, the amount, and the percentage of each change.
- c. For each commissioner, provide the approximate amount of time required monthly to fulfill his duties and responsibilities in official utility business.
- 8. Provide the date of each commissioners' meeting held during the test year and indicate the total number of commissioners in attendance at each meeting.
- 9. Provide an itemized listing of the costs incurred to date for the preparation of this case and an itemized estimate of the total cost to be incurred. Indicate any costs associated with this case that were incurred during the test year. For these costs, include the account charged for each amount and a detailed explanation of the services provided by each firm or individual rendering services in connection with this case.
- 10. East Logan requests authority to reamortize existing bond indebtedness in the application. Provide a detailed explanation of the proposed borrowing and loan reamortization mentioned in paragraph VII of East Logan's petition. Provide any documentation from the lending agency approving the reamortization. Include a copy of the letter of conditions from FmHA if applicable.

- 11. In reference to the \$100,000 note payable to Citizens National Bank, provide details concerning the use of these funds.
- 12. Please explain why East Logan did not seek Commission approval for this financing.

Done at Frankfort, Kentucky, this 30th day of January, 1986.

PUBLIC SERVICE COMMISSION

ATTEST:

Special Charge Cost Schedule

Тур	e of	Special Charge:	
	Fie	ld Expense	
	A.	Materials (Itemize)	
			\$
	В.	Labor (Time and Wage)	
		Subtotal Field Expense	
2. (Cler	ical and Office Expense	
	A.	Supplies	\$
	B.	Labor	*
		Subtotal Clerical and Office Expense	
3.	Misc	cellaneous Expense	
	A.	Transportation	\$
	В.	Other (Itemize)	
•		Subtotal Miscellaneous Expense	
		Total Expense	

COMMONWEALTH OF KENTUCKY

PUBLIC SERVICE COMMISSION

P.O. BOX 615

FRANKFORT, KENTUCKY 40602

Average Metered Service Connection Expense

Name of	Utility:	Address	·			
The following is an itemization of expenses for providing a metered service connection.						
	er Size -Inch /_/ 3/4-Inch /_/	1-Inch /	7 1 1/2-	-Inch/	2-Inch /	
Other (specify)					
B. Mat	B. Materials Expense					
		Quanity	Unit Cost	Total Cost		
1.	Water Meter	<u>s</u>	<u>, </u>	\$		
2.	Meter Yoke					
3.	Corporation Stop					
4.	Meter Box and Top					
5.	Miscellaneous Fittings					
	(Itemize)			***************************************		
6.	Subtotal (Add column 3)				<u>/</u> s/	

c.	Ser	vice Pipe Expense				
	Тур	e of Service Pipe:	Size of Service Pipe			
			Quanity	Unit Cost	Total Cost	
	1.	Short Side Service	L	F. S L.:	F	
	2.	Long Side Service	<u>L</u> .	FL,	F	
	3.	Subtotal (Add column 3 and divide by 2)				·/s
D.	Ins	tallation Expense				
	Lab	or				
			Total Hours	Rate Per Hour	Total Cost	
	1.	Short Side Service		<u> </u>	<u>\$</u>	-
	2.	Long Side Service				<u>.</u>
	3.	Subtotal (Add column 3 and divide by 2)				<u>/s</u>
	Equ	ipment	_			
			Total Hours	Rate Per Hour	<u>Total</u> <u>Cost</u>	
	1.	Short Side Service		\$	<u>s</u>	
	2.	Long Side Service		····		
	3.	Subtotal (Add column 3 and divide by 2)				<u>/s</u> /
	Mis	cellaneous				
			Total	Rate Per Hour	Total Cost	
	1.	Inspection	***************************************			•
	2.	Site Clean-Up				_
	3.	Other (Itemize)				- / /
	4.	Subtotal (Add column 3)				/s /

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E.	Overhead Expense			
	1.	Installation expense (\$) x	,	
		overhead rate (3)	<u>/s</u>	/
F.	Adm	inistrative Expense		
	1.	Office expense for establishing a new account	,	,
		and billing record.	/\$	
G.	Expe	ense Summary	,	,
	1.	Total of items B-F	<u>/\$</u>	_/

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