



Steven L. Beshear
Governor

Leonard K. Peters
Secretary
Energy and Environment Cabinet

Commonwealth of Kentucky
Public Service Commission
211 Sower Blvd.
P.O. Box 615
Frankfort, Kentucky 40602-0615
Telephone: (502) 564-3940
Fax: (502) 564-3460
psc.ky.gov

David L. Armstrong
Chairman

James W. Gardner
Vice Chairman

February 6, 2012

Sandra Gary, Office Manager
Muhlenberg County Water District #3
P. O. Box 67
4789 Main Street
Bremen, KY 42325

Chester Lear, Superintendent
Muhlenberg County Water District #3
P. O. Box 67
4789 Main Street
Bremen, KY 42325

RE: Case No. 2012-00017
Muhlenberg County Water District #3
(Alternative Rate Filing Adjustment)

The Commission staff has reviewed Muhlenberg County Water District #3's application in the above case and finds that it met the minimum filing requirements upon receipt of the original on January 24, 2012 and has been accepted for filing.

Enclosed please find a stamped filed copy of the first page of your filing. This case has been docketed and will be processed as expeditiously as possible.

If you need further assistance, please contact my staff at 502-564-3940.

Sincerely,

A handwritten signature in cursive script that reads "Linda Faulkner".

Linda Faulkner
Filings Division Director

LF/rs

SUBMIT ORIGINAL AND FIVE ADDITIONAL COPIES, UNLESS FILING ELECTRONICALLY

**APPLICATION FOR RATE ADJUSTMENT
BEFORE THE PUBLIC SERVICE COMMISSION**

For Small Utilities Pursuant to 807 KAR 5:076
(Alternative Rate Filing)

RECEIVED

JAN 24 2012

Muhlenberg County Water District #3
(Name of Utility)

4789 Main Street
(Business Mailing Address - Number and Street, or P.O. Box)

Bremen, Ky 42325
(Business Mailing Address - City, State, and Zip)

270-525-6333
(Telephone Number)

PUBLIC SERVICE
COMMISSION

FILED

BASIC INFORMATION

NAME, TITLE, ADDRESS, TELEPHONE NUMBER and E-MAIL ADDRESS of the person to whom ~~calls should be directed~~ or communications concerning this application should be directed:

JAN 24 2012

PUBLIC SERVICE
COMMISSION

Sandy Gary
(Name)

4789 Main Street
(Address - Number and Street or P.O. Box)

Bremen, Ky 42325
(Address - City, State, Zip)

270-525-6333
(Telephone Number)

sandygary@bellsouth.net
(Email Address)

(For each statement below, the Applicant should check either "YES" or "NO".)

- | | YES | NO |
|--|-------------------------------------|-------------------------------------|
| 1. a. In its most recent calendar year of operation, Applicant had \$5,000,000 or less in gross annual revenue. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| b. Applicant operates two or more divisions that provide different types of utility service. In the most recent calendar year of operation, Applicant had \$5,000,000 or less in gross annual revenue from the division for which a rate adjustment is sought. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Applicant has filed an annual report with the Public Service Commission for the past year and the two previous years. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Applicant's records are kept separate from other commonly-owned enterprises. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. a. Applicant is a corporation. A copy of its articles of incorporation and all amendments are attached to this application or were filed with the Public Service Commission in Case No. _____. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b. Applicant is a limited liability company. A copy of its articles of organization and all amendments are attached to this application or were filed with the Public Service Commission in Case No. _____. | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Applicant is not a corporation or a limited liability company. | <input checked="" type="checkbox"/> | <input type="checkbox"/> |