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## APPLICATION FOR RATE ADJUSTMENT BEFORE THE PUBLIC SERVICE COMMISSION

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

		(Alternative Nate 1 ming)		
		NAVITAS KY NG, LLC		
		(Name of Utility)		
		3186-D AIRWAY AVE		
		(Business Mailing Address - Number and Street, or P.O. Box )		
		COSTA MESA CA 92626		
	-	(Business Mailing Address - City, State, and Zip)		
		714-242-4064		
		(Telephone Number)		
		BASIC INFORMATION		
		TITLE, ADDRESS, TELEPHONE NUMBER and E-MAIL ADDRESS of the person to whom corre	espondence	or
		THOMAS HARTLINE, PRESIDENT		
		(Name)		
		3186-D AIRWAY AVE		
		(Address - Number and Street or P.O. Box)		
		COSTA MESA CA 92626		
		(Address - City, State, Zip)		
		714-242-4064		
		(Telephone Number)		
		thartline@navitasutility.com		
		(Email Address)		
		(Faranch statement halour the Applicant should shock sither "VFS" "NIO" or		
		(For each statement below, the Applicant should check either "YES", "NO", or "NOT APPLICABLE" (N/A))	YES NO	N/A
1.	a.	In its immediate past calendar year of operation, Applicant had \$5,000,000 or less in gross annual revenue.		
	b.	Applicant operates two or more divisions that provide different types of utility service. In its immediate past 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.		
2.	a.	Applicant has filed an annual report with the Public Service Commission for the past year.	<b>V</b>	
	b.	Applicant has filed an annual report with the Public Service Commission for the two previous years.	<b>V</b>	
3.		Applicant's records are kept separate from other commonly-owned enterprises.		

YES NO N/A

4.	a.	Applicant is a corporation that is organized under the laws of the state of, is authorized to operate in, and is in good standing in the state of Kentucky.	
	b.	Applicant is a limited liability company that is organized under the laws of the state of, is authorized to operate in, and is in good standing in the state of Kentucky.	
	C.	Applicant is a limited partnership that is organized under the laws of the state of, is authorized to operate in, and is in good standing in the state of Kentucky.	
	d.	Applicant is a sole proprietorship or partnership.	
	e.	Applicant is a water district organized pursuant to KRS Chapter 74.	
	f.	Applicant is a water association organized pursuant to KRS Chapter 273.	
5.	a.	A paper copy of this application has been mailed to Office of Rate Intervention, Office of Attorney General, 1024 Capital Center Drive, Suite 200, Frankfort, Kentucky 40601-8204.	
	b.	An electronic copy of this application has been electronically mailed to Office of Rate Intervention, Office of Attorney General at rateintervention@ag.ky.gov.	
6.	a.	Applicant has 20 or fewer customers and has mailed written notice of the proposed rate adjustment to each of its customers no later than the date this application was filed with the Public Service Commission. A copy of this notice is attached to this application. (Attach a copy of customer notice.)	
	b.	Applicant has more than 20 customers and has included written notice of the proposed rate adjustment with customer bills that were mailed by the date on which the application was filed. A copy of this notice is attached to this application. (Attach a copy of customer notice.)	
	C.	Applicant has more than 20 customers and has made arrangements to publish notice once a week for three (3) consecutive weeks in a prominent manner in a newspaper of general circulation in its service area, the first publication having been made by the date on which this Application was filed. A copy of this notice is attached to this application. (Attach a copy of customer notice.)	
7.		Applicant requires a rate adjustment for the reasons set forth in the attachment entitled "Reasons for Application." (Attach completed "Reasons for Application" Attachment.)	✓ 🗆

YES NO N/A

8.	Applicant proposes to charge the rates that are set forth in the attachment entitled "Current and Proposed Rates." (Attach completed "Current and Proposed Rates" Attachment.)	
9.	Applicant proposes to use its annual report for the immediate past year as the test period to determine the reasonableness of its proposed rates. This annual report is for the 12 months ending December 31,	
10.	Applicant has reason to believe that some of the revenue and expense items set forth in its most recent annual report have or will change and proposes to adjust the test period amount of these items to reflect these changes. A statement of the test period amount, expected changes, and reasons for each expected change is set forth in the attachment "Statement of Adjusted Operations." (Attach a completed copy of appropriate "Statement of Adjusted Operations" Attachment and any invoices, letters, contracts, receipts or other documents that support the expected change in costs.)	
11.	Based upon test period operations, and considering any known and measurable adjustments, Applicant requires additional revenues of \$ 992,435.57 and total revenues from service rates of \$ 2,282,907.28 . The manner in which these amounts were calculated is set forth in "Revenue Requirement Calculation" Attachment. (Attach a completed "Revenue Requirement Calculation" Attachment.)	
12.	As of the <b>date of the filing of this application</b> , Applicant hadcustomers.	
13.	A billing analysis of Applicant's current and proposed rates is attached to this application. (Attach a completed "Billing Analysis" Attachment.)	
14.	Applicant's depreciation schedule of utility plant in service is attached. (Attach a schedule that shows per account group: the asset's original cost, accumulated depreciation balance as of the end of the test period, the useful lives assigned to each asset and resulting depreciation expense.)	
15. a.	Applicant has outstanding evidences of indebtedness, such as mortgage agreements, promissory notes, or bonds.	
b.	Applicant has attached to this application a copy of each outstanding evidence of indebtedness (e.g., mortgage agreement, promissory note, bond resolution).	
C.	Applicant has attached an amortization schedule for each outstanding evidence of indebtedness.	

				YES NO N/A
16. a.	Applicant is not required to file state an	d federal	tax returns.	
b.	Applicant is required to file state and fed	deral tax	returns.	$ \Box $
C.	Applicant's most recent state and feder (Attach a copy of returns.)	al tax ret	urns are attached to this Application.	
17.	Approximately (Insert plant) of Applicant's total utility plant lots or other contributions.			
18.	Applicant has attached a completed Transactions for each person who 807 K			
which t	By submitting this application, the Apand waives any right to place its proposite application is accepted by the Public I am authorized by the Applicant to significant to applicate this application, and to the lation and its attachments is true and corrections.	sed rates ic Service in and file best of r	into effect earlier than six months from the Commission for filing.  ethis application on the Applicant's being knowledge all the information con	om the date or half, have read ntained in this
		Date		
COMM	IONWEALTH OF KENTUCKY			
COUN	TY OF			
applica	Before me appeared  e/she had read and completed this attion on behalf of the Applicant, and ned in this application and its attachmen	application that to	on, that he/she is authorized to sign the best of his/her knowledge all th	and file this
			Notary Public	
			My commission expires:	

ACCOMPANIED DE LA CONTRACTOR DE LA CONTR

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	
County of ORange	
	Subscribed and sworn to (or affirmed) before me on
	this 23rd day of Sept 20 25, b
	17 Thomas Hartline
JULIE LOVING Notary Public - California Orange County Commission # 2409985 My Comm. Expires Jul 5, 2026	(and (2))  Name(s) of Signer(s)
	proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me,
Place Notary Seal and/or Stamp Above	Signature of Notary Public
OPT	IONAL
Completing this information can e fraudulent reattachment of this	deter alteration of the document or form to an unintended document.
Description of Attached Document	
Title or Type of Document: Application for	rRate Adjustment Navitasky NG
Document Date: Sept 33td 2025	Number of Pages: 5
Signer(s) Other Than Named Above:	

## LIST OF ATTACHMENTS (Indicate all documents submitted by checking box)

✓ Customer Notice of Proposed Rate Adjustment
✓ Current and Proposed Rates" Attachment
✓ "Statement of Adjusted Operations" Attachment
"Revenue Requirements Calculation" Attachment
✓ Attachment Billing Analysis" Attachment
✓ Depreciation Schedules
Outstanding Debt Instruments (i.e., Bond Resolutions, Mortgages, Promissory Notes, Amortization Schedules.)
✓ State Tax Return
✓ Federal Tax Return
✓ Statement of Disclosure of Related Party Transactions - ARF Form 3