Andy Beshear Govérnor

Rebecca W. Goodman Secretary Energy and Environment Cabinet



**Public Service Commission** 

211 Sower Blvd. P.O. Box 615 Frankfort Kentucky 40602-0615 Telephone: (502) 564-3940 psc.ky.gov

November 7, 2023

Kent A. Chandler Chairman

> Angie Hatton Vice Chairman

Mary Pat Regan Commissioner

PARTIES OF RECORD

RE: Case No. 2023-00299

> Magoffin County Water District (Alternative Rate Filing Adjustment)

The Commission Staff has reviewed the filing submitted November 7, 2023 and has determined that the application in the above case now meets the minimum filing requirements. Attached 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,

Linda C. Bridwell **Executive Director** 

Gudwell



## SUBMIT ORIGINAL AND FIVE ADDITIONAL COPIES, UNLESS FILING ELECTRONICALLY

## APPLICATION FOR RATE ADJUSTMENT BEFORE THE PUBLIC SERVICE COMMISSION

## FILED

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

NOV 07 2023

	(Alternative Rate Filing)	NOV 0/	2023
_	Magoffin County Water District	PUBLIC SEI	
	870 Parkway Dr PO Box 490		
	(Business Mailing Address - Number and Street, or P.O. Box)		
_	Salyersville, KY 41465 (Business Mailing Address - City, State, and Zip)		
_	606-349-6812 (Telephone Number)		-
	BASIC INFORMATION  TITLE, ADDRESS, TELEPHONE NUMBER and E-MAIL ADDRESS of the person to whom unications concerning this application should be directed:	correspondenc	e or
	Allen McCarty - General Manager		
	(Name)		
	870 Parkway Dr PO Box 490 (Address - Number and Street or P.O. Box)		
	Salyersville, KY 41465		
	(Address - City, State, Zip)		
	606-349-6812		
	(Telephone Number)		
	mcwd07@yahoo.com (Email Address)		
	<del>,</del>		
	(For each statement below, the Applicant should check either "YES", "NO", o "NOT APPLICABLE" (N/A))		O N/A
l. a.	In its immediate past calendar year of operation, Applicant had \$5,000,000 or less gross annual revenue.	in 🗹 [	
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 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 payear.	ast 🗸 [	
b.	Applicant has filed an annual report with the Public Service Commission for the two previous years.	/o 🗹 [	
3.	Applicant's records are kept separate from other commonly-owned enterprises.	V	

\*Ariel Miller Kentucky Rural Water Association Post Office Box 1424 1151 Old Porter Pike Bowling Green, KENTUCKY 42102-1424

\*Magoffin County Water District 749 Parkway Road P. O. Box 490 Salyersville, KY 41465

\*Allen McCarty Superintendent Magoffin County Water District 749 Parkway Rd P. O. Box 490 Salyersville, KY 41465