

VERIFIED STATEMENT IN SUPPORT OF CHANGE IN SCHEDULE OF RATES

TO THE INDIANA UTILITY REGULATORY COMMISSION:

| 1. | | | | under and pursuant to the | | |
|----------|----------------------|---|-------------------------|--|--|--|
| | Indiana Utility Reg | gulatory (| Commission A | Act, as amended, hereby files with the Indiana Utility | | |
| | Regulatory Comm | ission, [| an increase | a decrease (<i>check one</i>) in its schedule of rates for | | |
| | | | | nt of \$ per | | |
| | one). | | | • | | |
| | | | | | | |
| 2. | 1 . | | | of rates are based solely upon the change in the cost of | | |
| | sewage disposal se | rvice pur | chased by this | s utility computed in accordance with 170 IAC 8.6-1. | | |
| 3. | All of the metters | and foots | stated barain | and in the attached exhibits are true and correct. The | | |
| 3. | | | | | | |
| | by the Commission | rate changes shall take effect for the next practical consumption period following final approval | | | | |
| | by the Commission | 1. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | By: Executive Officer | | |
| | | | | Executive Officer | | |
| | | | | | | |
| STAT | E OF INDIANA |) | ~ ~ | | | |
| | |) | SS: | | | |
| COUN | NTY OF |) | | | | |
| | Parsonally appears | d bafara | ma a Notary | Public in and for said County and State, this | | |
| | day of | u belole | 20 | who after having been duly | | |
| | according to law st | ated that | , 20, he/she is an o | , who, after having been duly fficer of; that | | |
| ba/cha | has read the matters | and fact | s stated above | e, and in all exhibits attached hereto, and that the same | | |
| | | | | this instrument for and on behalf of the applicant | | |
| herein | • | aumonz | ed to execute | this institution for and on behalf of the applicant | | |
| 11010111 | • | | | | | |
| | | | | | | |
| | | | | | | |
| Notar | y Public | | | _ | | |
| • | • | | | | | |
| Му С | ommission Expires: | (month, a | lay, year) | | | |
| | | | | | | |

Sewage Treated by Supplier During Test Year* (1,000 gallons or 100 cu. Ft.)

| Month | Gallons |
|-------------|-------------|
| | |
| | |
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| | |
| | |
| | |
| Total | |

^{*}Test year is the twelve (12) most recent months for which information is available to the sewer utility at the time it receives notice of a supplier rate change.

COMPUTATION OF CHANGE IN COST OF SEWAGE DISPOSAL SERVICE PURCHASED DUE TO CHANGE IN SUPPLIER'S RATE

| vage Disposal Service Pu | rchased for Tw | velve (12) Mon | ths Ended | |
|--------------------------------|--|--|--|--|
| (2) <u>Supplier's Rate</u> | (3) | (4) <u>Annual Cost</u> | (5) of Sewage Disposal Ser | (6) vice Purchase |
| Immediately Prior to Change | Changed Rate | 100 cu. ft. or 1,000 gallons | At Rates Effective Immediately Prior to <u>Change</u> | At Changeo Rate |
| | | | | |
| | | | | |
| | (2) Supplier's Rate Immediately Prior to Change | (2) (3) Supplier's Rate Immediately Prior Changed to Change Rate | (2) (3) (4) Supplier's Rate Annual Cost Immediately Prior Changed to Change Rate gallons | Supplier's Rate Annual Cost of Sewage Disposal Ser 100 cu. ft. At Rates Effective or 1,000 Immediately Prior to gallons Change Change Rate 200 cu. ft. At Rates Effective or 1,000 Immediately Prior to gallons Change |

COMPUTATION OF SEWER TRACKER

(Per 100 cu. ft. or Per 1,000 gals)

| 1. | Cost of Purchases from Exhibit 3, Column 6 | New Rates | \$ |
|----|---|-----------|----|
| 2. | Cost of Purchases from Exhibit 3, Column 5 | Old Rates | \$ |
| 3. | Increased Purchased Sewage Disposal Service: (1) - (2) | | \$ |
| 4. | Increase in Utility Receipts Taxes and Other Similar Revenue Based Tax Charges% | | \$ |
| 5. | Increased Revenue Requirements (3) + (4) | | \$ |
| 6. | Total metered Water Sales: Test Year (in 100 cu. ft. or 1,000 gals) or | | |
| | Number of customers (flat rate) | | \$ |
| 7. | Tracking factor: $(5) - (6)$ | | \$ |

^{*}In case of a refund, this exhibit is to be modified in accordance with the sewer tracking procedure.

| UTILITY NAME: | | | |
|---------------|---------|--|--|
| | INDIANA | | |

RATE OF RETURN TEST (1) (APPLICABLE ONLY TO INVESTOR OWNED SEWER UTILITIES)

| Line Number | | |
|----------------|--|----|
| 1 | Rate of Return on Original Cost Rate Base Granted in Last Rate Order Number, Dated | % |
| 2 | Net Operating Income Per Books (2) | \$ |
| 3 | Rate Base Per Books (3) | \$ |
| 4 | Rate of Return (Divide line 2 by line 3) | % |

- (1) Please include a Balance Sheet and Income Statement for the same period as used for the tracker information.
- (2) This should be for twelve (12) months ended with the same cut-off as used for the tracker information.
- (3) This should be as of the end of the twelve (12) months used for the tracker information.

LEGAL NOTICE OF FILING FOR A CHANGE OF SEWER RATES BY

| Notice is hereby given that, |
|--|
| Indiana, under and pursuant to the Indiana Utility Regulatory Commission Act, as amended has |
| filed with the Indiana Utility Regulatory Commission on for |
| an increase a decrease (<i>check one</i>) in the schedule of rates for sewage disposal services |
| sold by its sewer utility in the amount of \$ per |
| one). The changes in schedules and rates submitted to the Commission are based solely upon the |
| change in the cost, effective, of purchased sewage disposal service. |
| The rate changes shall apply for the next practical consumption period following final approval by |
| the Commission. |
| |
| |
| |
| FOR ITS SEWER UTILITY |
| Ву: |
| Executive Officer |

APPENDIX A SEWER TRACKER

Applicable to All Rates

| | The Sewer Tracker occasion | oned solely by changes in the cost of sewage disposal |
|---------|----------------------------|---|
| service | e is \$ | approved by the Commission in conference on |
| | | |