e-FILING REPORT COVER SHEET



COMPANY NAME: Pelican Bay Heights Water System, LLC

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes If yes, submit a redacted public version (or a cover letter) by email. Submit the confidential information as directed in OAR 860-001-0070 or the terms of an applicable protective order.

Select report type: RE (Electric) RG (Gas) RW (Water) RT (Telecommunications) RO (Other, for example, industry safety information)
Did you previously file a similar report? No Yes, report docket number:
Report is required by: AR Statute Order Note: A one-time submission required by an order is a compliance filing and not a report (file compliance in the applicable docket) Other (For example, federal regulations, or requested by Staff)
Is this report associated with a specific docket/case? No Yes, docket number:

List Key Words for this report. We use these to improve search results.

Send the completed Cover Sheet and the Report in an email addressed to <u>PUC.FilingCenter@state.or.us</u>

Send confidential information, voluminous reports, or energy utility Results of Operations Reports to PUC Filing Center, PO Box 1088, Salem, OR 97308-1088 or by delivery service to 3930 Fairview Industrial Drive SE, Salem, OR 97302.

Print

Must be electronically filed with the Public Utility Commission of Oregon at: <u>PUC.FilingCenter@state.or.us</u> on or before May 31, 2015 If you have questions about the form call Stephanie Yamada at (503)378-5201 email: Stephanie.Yamada@state.or.us

Mail the original to: Public Utility Commission of Oregon PO Box 1088 Salem, OR 97308-1088

Affiliated Interest Annual Report for Water Utilities

OAR 860-036-0816

Utility Company Name: Pelican Bay Heights Water System, LLC Address: PO Box 2767, Harbor, OR 97415 Telephone: 541-412-7566 Email: jamlin@frontier.com

Annual Transactions for Jan. 1 through Dec. 31, 2014

Please use this format and attach additional sheets if needed.

Docket and Order No.*	Name of Affiliate And Description of Affiliation	Purpose of Transaction	Hours and Current Hourly Rate If Applicable	Annual Dollar Amount
		No affiliated interest transactions this year		
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Have any changes occurred to the utility, affiliate, or the affiliated relationships that affect any affiliated interest contracts?

NO
VES - Using a separate sheet, please explain the changes and provide any other pertinent information.
Signature of responsible party:

Printed name: _____Ian Amlin ____ Position held in utility: ____Operator/Manager______

Telephone Number: ____541-412-7566_____email: ____jamlin@frontier.com______

The Commission may request further information regarding any affiliated interest transaction.

This form must be filed electronically via the PUC Filing Center as indicated at the top of the page.

*If you do not know the docket or order number, please call and I will help you with that information. Please **do not** file the form with this section blank.