

REQUEST TO ESTABLISH DOCKET
(Please Type)

Date	May 4, 2004	Docket No.	040404-TC
------	-------------	------------	-----------

1. Division Name/Staff Name:	Division of Competitive Markets & Enforcement/Isler
------------------------------	---

2. OPR:	Division of Competitive Markets & Enforcement
---------	---

3. OCR:	Office of the General Counsel
---------	-------------------------------

4. Suggested Docket Title:	Cancellation by Florida Public Service Commission of PATS Certificate No. 7829 issued to Payphone Partners, Inc., for violation of Rule 25 ⁰⁴ .0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.
----------------------------	---

5. Suggested Docket Mailing List (attach separate sheet if necessary)

A. Provide NAMES OR ACRONYMS ONLY if a regulated company.

B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)

1. Parties and their representatives (if any):

2. Interested persons and their representatives (if any):

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

STATE OF FLORIDA

COMMISSIONERS:
BRAULIO L. BAEZ, CHAIRMAN
J. TERRY DEASON
LILA A. JABER
RUDOLPH "RUDY" BRADLEY
CHARLES M. DAVIDSON



DIVISION OF COMPETITIVE MARKETS &
ENFORCEMENT
BETH W. SALAK
DIRECTOR
(850) 413-6600

Public Service Commission

March 15, 2004

Mr. Walter L. Jones, President
Payphone Partners, Inc. (TG811)
PO Box 617
Tangerine, FL 32777-0617

Dear Mr. Jones:

On March 10, 2004, the Commission received the request for updated reporting requirements from you with the note "please cancel certificate" and "please delete from records." I researched our records but could not find record that you had previously requested cancellation of your certificate from this Commission. A copy of the cancellation rule is enclosed.

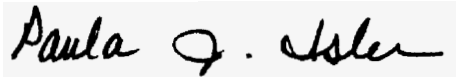
I also researched our records and found that the 2003 Regulatory Assessment Fee has not been paid. As information, the Regulatory Assessment Fee is assessed if a certificate is active for any one day during a calendar year, even if a company had no revenues or ever started operations during the period covered. This means that since you did not request cancellation of your certificate in 2003, the 2003 and 2004 Regulatory Assessment Fees, plus statutory late payment charges, are owed.

Therefore, before a docket can be opened to cancel your payphone certificate, please send payment of the \$50.00 minimum for the 2003 fee, the \$50.00 minimum for the 2004 fee, the \$6.00 late payment charges for 2003, and the completed 2003 and 2004 Regulatory Assessment Fee return forms, which are enclosed. The total due is \$109. When responding, please use the enclosed blue envelope, which will insure prompt processing. Please respond by March 30, 2004, to avoid additional late payment charges.

Mr. Walter L. Jones, President
Page 2
Monday, March 15, 2004

In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-phone, (850) 413-6503-fax, by internet e-mail at PIsler@psc.state.fl.us, or at the address at the bottom of Page One.

Sincerely,



Paula J. Isler, Research Assistant
Bureau of Service Quality

Enclosures
TMS #1137

25-24.514 Cancellation of a Certificate.

(1) The Commission may cancel a company's certificate for any of the following reasons:

(a) Violation of the terms and conditions under which the authority was originally granted;

(b) Violation of Commission rules or orders;

(c) Violation of Florida Statutes; or,

(d) Failure to provide service for a period of six (6) months.

(2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request:

(a) Statement of intent and date to pay Regulatory Assessment Fee.

(b) Statement of why the certificate is proposed to be cancelled.

(3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority: 350.127(2), F. S.

Law Implemented: 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345, F.S.

History: New 1/5/87.

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission
(See Filing Instructions on Back of Form)

STATUS:
 _____ Actual Return
 _____ Estimated Return
 _____ Amended Return

TG811-03-0-R
 Payphone Partners, Inc.
 P. O. Box 617
 Tangerine, FL 32777-0617
 CC: P. Isler

FOR PSC USE ONLY	
Check#	_____
\$	0603002
	003001
\$	P
	0603002
	004011
\$	I
Postmark Date	_____
Initials of Preparer	_____

PERIOD COVERED:
 01/01/2003 TO 12/31/2003

Please Complete Below If Official Mailing Address Has Changed

 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	TOTAL AMOUNT DUE	\$ _____

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return _____

* These amounts must be intrastate only and must be verifiable.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

 (Signature of Company Official) (Title) (Date)

 (Preparer of Form - Please Print Name) Telephone Number () Fax Number ()
 F.E.I. No. _____

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
01/01/2004 TO 12/31/2004

Florida Public Service Commission
(See Filing Instructions on Back of Form)

TG811-04-0-R
Payphone Partners, Inc.
P. O. Box 617
Tangerine, FL 32777-0617

cc: P. Isler

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY	
Check#	_____
\$	0603002
	003001
\$	P
	0603002
	004011
\$	1
Postmark Date	_____
Initials of Preparer	_____

(Name of Company)

(Address)

(City/State)

(Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ _____
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	_____
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ _____
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	_____
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____
8.	TOTAL AMOUNT DUE	\$ _____

AS PROVIDED IN SECTION 364.336 FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

THIS FORM MUST BE COMPLETED AND RETURNED REGARDLESS OF THE AMOUNT OF REVENUES REPORTED

9. Number of pay telephones in operation at close of period covered by this Return _____

* These amounts must be intrastate only and must be verifiable.

I, the undersigned owner/officer of the above-named company, have read the foregoing and declare that to the best of my knowledge and belief the above information is a true and correct statement. I am aware that pursuant to Section 837.06, Florida Statutes, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

(Signature of Company Official)

(Title)

(Date)

(Preparer of Form - Please Print Name)

Telephone Number () _____ Fax Number () _____

F.E.I. No. _____

Paula Isler

From: Kflynn@psc.state.fl.us
Sent: Thursday, March 11, 2004 11:17 AM
To: SHOWARD@psc.state.fl.us; DFORDHAM@psc.state.fl.us
Subject: New filing in undocketed matter

DOCUMENT DESCRIPTION = Payphone Partners, Inc. (Jones) - MCD update form [TG811] with note requesting "delete from records - please cancel certificate." [CCA note: Advice requested from CMP/Isler on opening docket; advised company owes 2003 and 2004 RAFs.]

DOCUMENT PATH =
file://L:\PSC\LIBRARY\FILINGS\04\03364-04

Document ID = 03364-04
Document Filed 03/10/04

The filing described above is now available in PDF format, and may also be available in WordPerfect or other formats.

To access it, click on the DOCUMENT PATH link. This will pop up a Windows Explorer window. You will see the PDF (Adobe Acrobat) version; you will also see other versions if they exist. Double-click on the preferred version and the document will open.

If you need to cut/paste/search in the document and find you can't, try later when the reformatted version is available. (For more information, see PDF Tips on the How To menu.)

You can also go to the docket in CMS by triple-clicking on the DOCKET NUMBER, typing ctrl-C to copy, and using the paste icon to paste the docket number into the query line in CMS.

This is an automatically generated e-mail; no response/reply is necessary.

ORIGINAL (010000)

Info dk 3-10-04

Payphone Partners, Inc.

Company Code: TG811

Certificate No(s): 7829

HAR 10 AM 9:35

Physical Location: 6337 North Terrell Road Tangerine, FL 32777	COMMISSION ENTER CORRECTIONS BEEHW:
Mailing Address: P. O. Box 617 Tangerine, FL 32777-0617	
Liaison Officer(s): 1. Walter L. Jones, President, (352) 735-9269 2. Name, Title, Phone number	
Fax No(s): (352) 735-9349, Fax 2 E-mail address: wjones2322@aol.com Web address: Federal Employee ID No.: 59-3724342	

Delete from records

WJ 3-5-04

78811

IMPORTANT NOTE:

The following section is applicable ONLY to companies with d/b/a as part of their official company name.

All official correspondence is addressed to the "Mailing Name" of regulated companies. The "Mailing Name" is the last d/b/a of the company's official name. Our records reflect the mailing name shown below for your company. If you prefer to receive official correspondence in another mailing name, please make the change in the space provided. The name can be no longer than 58 characters (including spaces) and MUST be part of the official company name.

Please Cancel Certificate

Please Delete from Recd.

MAILING NAME:

Payphone Partners, Inc.

- AUS _____
- CAF _____
- CMP _____
- COM _____
- CTR _____
- ECR _____
- GCL _____
- OPC _____
- MMS _____
- SEC I
- OTH _____

COMPLETED BY: Walter Jones DATE: 3-5-04

DOCUMENT NUMBER-DATE
03364 HAR 10 03
FPSC-COMMISSION CLERK

Paula Isler

From: Kay Flynn
Sent: Wednesday, March 10, 2004 3:49 PM
To: Paula Isler
Subject: RE: cancel PATS Cert 7829?

Okay.

-----Original Message-----

From: Paula Isler
Sent: Wednesday, March 10, 2004 3:48 PM
To: Kay Flynn
Subject: RE: cancel PATS Cert 7829?

Same as the other. They owe 2003 and 2004 RAFs. If they did not pay, I will need to contact them.

-----Original Message-----

From: Kay Flynn
Sent: Wednesday, March 10, 2004 3:18 PM
To: Paula Isler
Subject: cancel PATS Cert 7829?

Paula, Nonnye's MCD update form was returned by this company with the note "please delete from records - please cancel certificate" written on it. See DN 03364-04 in the undocketed:

Shall we open a docket to cancel the cert?

Kay

COMPANY IDENTIFICATION

Printed on 03/15/2004 at 10:09:32 by PJI

Complete Name: Payphone Partners, Inc.

Mailing Name: Payphone Partners, Inc.

Company Code: TG811 FEID Number: 59-3724342

RAF ACCOUNT FOR THE PERIOD 01/01/2003 THROUGH 12/31/2003

Reg. Date: 06/28/2001 Inactive Date:
 Service: PAT - Pay Telephone
 Received: No RAF Form
 Status: Pending
 Amended: No Extension: No
 Frozen: No Comments: No
 Payment Count: 0 Payments Made to Date
 Operating Rev: \$0.00 Interstate Rev: \$0.00
 RAF Rate: Net RAF Due: \$0.00

Assessment	Due	Paid	Owe
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Wednesday, December 3, 2003 at 9:46 AM by David Brown

Period covered: 01/01/2003 through 12/31/2003 RAF rate:
 Operating rev: \$0.00 Gross intrastate rev: \$0.00
 Documents: Delinquent letter mailed on 02/20/2004
 Delinquent letter mailed on 02/19/2004
 RAF form mailed on 12/03/2003

MCD Company Information for TG811

Printed on 03/15/2004 at 10:19:20 by PJI

Company Code: TG811
Complete Name: Payphone Partners, Inc.
Mailing Name: Payphone Partners, Inc.
Certificate No(s): 7829
Status: Active
Regulation Date: 06/28/2001
Bankruptcy: No
Company Liaison #1: Walter L. Jones
Title: President
Mailing Address: P. O. Box 617

Physical Location: Tangerine, FL 32777-0617
6337 North Terrell Road

Phone: Tangerine, FL 32777
(352) 735-9269
Fax: (352) 735-9349

Related Dockets:

010547-TC Application for certificate to provide pay telephone service by
Payphone Partners, Inc.