

**REQUEST TO ESTABLISH DOCKET**

(PLEASE TYPE)

Date 3/3/03

Docket No. 030219-TC

- 1. Division Name/Staff Name Division of Competitive Markets & Enforcement/McCoy
- 2. OPR CHP/McCoy *CHP*
- 3. OCR Legal Services
- 4. Suggested Docket Title Request for Cancellation of Pay Telephone Certificate No. 7634  
American Transport Service Inc., effective 12/31/02.

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

- A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.
- B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

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.

I:\PSC\RAR\WP\ESTDKT.  
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE  
02106 MAR-3 03  
FPSC-COMMISSION CLERK

COMPANY INFORMATION

AS OF 03/03/2003

American Transport Service Inc. (TG755)

Location address

American Transport Service Inc.  
901 Apricot Avenue  
Sarasota, FL 34237-2803

Regulation date

12/08/2000

Certificate(s)

7634

Services provided

PAT

**COMPANY IDENTIFICATION**

Printed on 03/03/2003 at 10:51:20 by TJM

Complete Name: American Transport Service Inc.

Mailing Name: American Transport Service Inc.

Company Code: TG755                      FEID Number: 65-0811278

**RAF ACCOUNT FOR THE PERIOD 01/01/2002 THROUGH 12/31/2002**

Reg. Date:	12/08/2000	Inactive Date:	
Service:	PAT - Pay Telephone		
Received:	Actual RAF Form		
Status:	Satisfied		
Amended:	No	Extension:	No
Frozen:	No	Comments:	No
Payment Count:	1 Payment Made to Date		
Operating Rev:	\$0.00	Interstate Rev:	\$0.00
RAF Rate:	0.0015	Net RAF Due:	\$50.00

Assessment	Due	Paid	Owe
RAF	\$50.00	\$50.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$50.00</b>	<b>\$50.00</b>	<b>\$0.00</b>

Last modification was made on Tuesday, January 21, 2003 at 4:46 PM by Jackie Knight

JJM  
1/23/03

COMPANY NAME: American Transport Service Inc. CO. CODE: TG755

COMPANY LIAISON: Morgan Thomson, President

DOCKET NO.: \_\_\_\_\_ CERTIFICATE NO.: 7634 EFFECTIVE: 12/08/00

RAF RETURN NOTICE: \_\_\_\_\_

DELINQUENT NOTICE: \_\_\_\_\_

OTHER RETURNED MAIL: \_\_\_\_\_

CCA'S RETURNED MAIL: \_\_\_\_\_

YEAR(S) RAFs NOT PAID: 2002

YEAR(S) PENALTIES & INTEREST NOT PAID: \_\_\_\_\_

REVENUES/YEAR: \_\_\_\_\_

DATE LOTUS CHECKED FOR PAYMENT: \_\_\_\_\_

**OTHER INFORMATION**

01/07/03 - CCA provided me a copy of the company's 2002 RAF form with the

note: "We are no longer in business as of 2001."

01/08/03 - Wrote company. Returned the RAF form and advised company to

pay the 2002 RAF. Follow up 01/30/03

1/10/03 - vjm msg. @ 1:45pm fr. Jerry Msg. sd.

he rec'd. my letter, & doesn't understand

why he rec'd. it since he had previously

Cont.

1/10/03 - notified us they were no longer in  
bs. Doesn't believe they owe anything.

941-952-1801 or 941-809-6035 (cell)

- Called Jerry @ 2:13 pm & expl. that  
a cert. remains active until a Co.  
notifies us they are no longer in bs.

I expl. we were not notified until  
the 2002 RAF form was returned.

He sd. OK, he'd send us the money  
but feels it is "ridiculous."

1/17/03 - From Co. - Paym. of 2002 RAF.

1/22/03 - Forwarded to JG for handling.

Voluntary Cancellation, Eff. 12/31/02.

# Pay Telephone Service Provider Regulatory Assessment Fee Return

*✓ P. Isler  
LCA*

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

FOR PSC USE ONLY	
Check# <u>2167</u>	
\$ <u>50.00</u>	0603002
	003001
\$ _____	P
	0603002
\$ _____	004011
	I
Postmark Date <u>1/13/03</u>	
Initials of Preparer <u>MC</u>	

STATUS:

Actual Return

Estimated Return

Amended Return

TG755-02-0-R  
American Transport Service Inc.  
901 Apricot Avenue  
Sarasota, FL 34237-2803

DATE CC: P. Isler

PERIOD COVERED:  
01/01/2002 TO 12/31/2002

DEPOSIT 290  
**0290**

DATE **JAN 17 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)	\$ <u>50.00</u>
2.	Gross Intrastate Revenue	<u>0.00</u>
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ <u>50.00</u>
5.	Regulatory Assessment Fee Due – (Multiply Line 4 by 0.0015)	<u>11.00</u>
6.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	<u>0.00</u>
7.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	<u>0.00</u>
8.	<b>TOTAL AMOUNT DUE</b>	\$ <u>50.00</u>

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 0

These amounts must be intrastate only and must be verifiable.

*WE ARE NO LONGER IN BUSINESS  
AS OF 1/15/03*

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] (Signature of Company Official) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date) 12/16/02

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

*C: Paula Isler*

## Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return  
 Estimated Return  
 Amended Return

*Nannye*

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TG755-01-0-R  
 American Transport Service Inc.  
~~P.O. Box 18301~~  
 Sarasota, FL 34276-1301  
 901 APNICOT AVE  
 SARASOTA, FL 34237

**FOR PSC USE ONLY**

Check# 1444

\$ 50.00 0603002  
003001

\$ \_\_\_\_\_ P  
0603002  
004011

\$ \_\_\_\_\_ I

Postmark Date 1/7/02

Initials of Preparer MC

PERIOD COVERED:

01/01/2001 TO 12/31/2001

DEPOSIT

DATE

Please Complete Below If Official Mailing Address Has Changed

**D1530**

**JAN 11 2002**

(Name of Company)

(Address)

(City/State)

(Zip)

LINE

NO. ACCOUNT CLASSIFICATION

AMOUNT

1.	Gross Operating Revenue (Florida)	\$ <u>1377.85</u>
2.	Gross Intrastate Revenue	_____
3.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( <u>1377.85</u> )
4.	<b>TOTAL REVENUES for Regulatory Assessment Fee Calculation</b> (Line 2 less Line 3)	\$ <u>1377.85</u>
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.	<b>TOTAL AMOUNT DUE</b>	\$ <u>2.07</u>

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 7

\* 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]*  
(Signature of Company Official)

V. Rees 1-8-02  
(Title) (Date)

Graham J. Henson  
(Preparer of Form - Please Print Name)

Telephone Number 941-952-1804 Fax Number 941-952-1804

F.E.I. No. 65-08112198

STATE OF FLORIDA

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



DIVISION OF COMPETITIVE MARKETS &  
ENFORCEMENT  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

## Public Service Commission

January 8, 2003

Mr. Morgan Thomson, President  
American Transport Service Inc. (TG755)  
901 Apricot Avenue  
Sarasota, FL 34237-2803

Dear Mr. Thomson:

The Commission received the 2002 Regulatory Assessment Fee return form with what appears to be a request for cancellation. A note on the form states "We are no longer in business as of 2001." A copy of the form is enclosed.

There are two kinds of cancellations. The first is voluntary, which is normally granted if the company is in good standing with the Commission and does not have a past due balance of the Regulatory Assessment Fee, including statutory penalty and interest charges. The other is involuntary. If a company is not in good standing and has an outstanding balance of the Regulatory Assessment Fee, the Commission normally cancels the certificate on its own motion for a rule violation. It should be noted that any balance owed is forwarded to the Comptroller's Office for collection.

The Regulatory Assessment Fee, which is .0015% of a company's intrastate revenues, or \$50.00, whichever is greater, is assessed if a certificate is active for any one day during a calendar year. The Regulatory Assessment Fee is due by January 30 of each year, unless the 30th falls on a weekend, then the fee is due by the next working day, for the previous year. If payment for the Regulatory Assessment Fee is mailed after the due date, then statutory penalty and interest charges are applicable.

If the Commission receives payment of the fee by January 30, 2003, a docket will be established and the effective date of the cancellation will be December 31, 2002, so that you will not owe the 2003 Regulatory Assessment Fee.

Please respond in writing by January 30, 2003. In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, by internet e-mail at [pisler@psc.state.fl.us](mailto:pisler@psc.state.fl.us), or at the address below.

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CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD • TALLAHASSEE, FL 32399-0850

An Affirmative Action/Equal Opportunity Employer

PSC Website: <http://www.floridapsc.com>

Internet E-mail: [contact@psc.state.fl.us](mailto:contact@psc.state.fl.us)



Mr. Morgan Thomson, President  
Page 2  
January 8, 2003

Sincerely,

A handwritten signature in black ink that reads "Paula J. Isler". The signature is written in a cursive style with a large initial 'P' and a distinct 'J'.

Paula J. Isler, Research Assistant  
Bureau of Service Quality

Enclosure

