

**REQUEST TO ESTABLISH DOCKET**  
(Please Type)

<b>Date</b>	August 12, 2003	<b>Docket No.</b>	030802-77
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<b>1. Division Name/Staff Name:</b>	Division of Competitive Markets & Enforcement/Isler
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<b>2. OPR:</b>	Division of Competitive Markets & Enforcement
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<b>3. OCR:</b>	Office of the General Counsel
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<b>4. Suggested Docket Title:</b>	Imposition of penalty by Florida Public Service Commission against IXC
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Registration No. TJ598, issued to LightDial, Corp., for violation of Section 364.336, Florida Statutes.

**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.**

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

STATE OF FLORIDA



# 408  
DIVISION OF COMPETITIVE MARKETS &  
ENFORCEMENT  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

## Public Service Commission

April 28, 2003

Ms. Lindsey Botti, Project Coordinator  
LightDial, Corp. (TJ598)  
6 Morgan, Suite 156  
Irvine, CA 92618-1922

Dear Ms. Botti:

The Regulatory Assessment Fee (RAF) is due by January 30<sup>th</sup> of each year for the preceding calendar year. For certificate holders, the RAF is owed even if a telecommunications company may not have started operations or had any revenues. If payment is made after the due date, then statutory penalty and interest charges are applicable.

Our records show that the 2002 RAF return notice was mailed on December 12, 2002, and a delinquent notice was mailed on February 20, 2003. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2002 RAF return form is enclosed.

If full payment, including penalty and interest charges, along with the RAF return form, are not received by May 19, 2003, a docket will be established. Your company will be fined or your certificate cancelled if you do not respond. Please note that once a docket has been established, **just paying the delinquent RAF amount will not prevent your certificate from being cancelled.**

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should pay the past due amount in full, complete the 2002 RAF return form, either pay the 2003 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.474, Florida Administrative Code, copy enclosed. Any unpaid RAFs, including penalty and interest charges, are turned over to the Florida Department of Financial Services for further collection efforts.

If you have any questions, please contact me at (850) 413-6502, by fax at (850) 413-6503, by e-mail at [pisler@psc.state.fl.us](mailto:pisler@psc.state.fl.us), or by writing to me at the address below.

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler, Research Assistant  
Bureau of Service Quality

Enclosures

# Interexchange Company Regulatory Assessment Fee Return

**STATUS:**

- Actual Return
- Estimated Return
- Amended Return

**PERIOD COVERED:**

01/02/2002 TO 12/31/2002

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

TJ598-02-0-R  
 LightDial, Corp.  
 6 Morgan, Suite 156  
 Irvine, CA 92618-1922  
  
 CC: P. Isler

**FOR PSC USE ONLY**

Check# \_\_\_\_\_

\$ \_\_\_\_\_ 0603001  
 \_\_\_\_\_ 003001

\$ \_\_\_\_\_ P  
 \_\_\_\_\_ 0603001  
 \_\_\_\_\_ 004011

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

Postmark Date \_\_\_\_\_

Initials of Preparer \_\_\_\_\_

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)	(Address)	(City/State)	(Zip)
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LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Long Distance Services	\$ _____	\$ _____
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	<b>TOTAL Telephone Services</b>	\$ _____	\$ _____
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( _____ )	_____
8.	<b>TOTAL REVENUES For Regulatory Assessment Fee Calculation</b>	_____	_____
9.	<b>Regulatory Assessment Fee Due</b> (Multiply Line 8 by 0.0015)	_____	_____
10.	<b>Penalty for Late Payment</b> (see "3. Failure to File by Due Date" on back)	_____	_____
11.	<b>Interest for Late Payment</b> (see "3. Failure to File by Due Date" on back)	_____	_____
12.	<b>TOTAL AMOUNT DUE</b>	_____	\$ _____

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

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

### CURRENT COMPANY STATUS

- |   |                                   |  |
|---|-----------------------------------|--|
| <input type="checkbox"/> Facilities-Based Carrier   | <input type="checkbox"/> Reseller | <input type="checkbox"/> Call Aggregator |
| <input type="checkbox"/> Alternate-Operator Service | <input type="checkbox"/> Rebiller | <input type="checkbox"/> Other: _____    |

### BILLING INFORMATION

Complete below if billing agent if other than yourself.

(Name)	(Address: City/State/Zip)	(Telephone)
What is the total amount of customer deposits collected? Amount: \$ _____ for 19 _____	What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____	

### COMPANY INFORMATION

Do you lease telecommunications' facilities?  YES  NO

If YES, who do you lease these facilities from? Name: \_\_\_\_\_

Address: \_\_\_\_\_

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/her 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 ( _____ )

**25-24.474 Cancellation of a Certificate.**

(1) The Commission may on its own motion 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 rule or order; or
- (c) Violation of Florida Statutes.

(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.
- (c) A statement on treatment of customer deposits and final bills.
- (d) Proof of individual customer notice regarding discontinuance of service.

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

*Specific Authority 350.127(2) FS.*

*Law Implemented 350.113, 350.127(1), 364.285, 364.337, 364.345 FS.*

*History--New 2-23-87, Amended 3-13-96.*

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TJ598 LightDial, Corp.  
6 Morgan, Suite 156  
Irvine, CA 92618-1922

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X



- Agent
- Addressee

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label)

7002 0860 0001 1755 9669

## MCD Company Information for TJ598

Printed on 08/11/2003 at 16:12:54 by PJI

Company Code:	TJ598
Complete Name:	LightDial, Corp.
Mailing Name:	LightDial, Corp.
Certificate No(s):	8000
Status:	Active
Regulation Date:	01/02/2002
Bankruptcy:	No
Company Liaison #1:	Lindsey Botti
Title:	Project Coordinator
Mailing Address:	6 Morgan, Suite 156
Physical Location:	Irvine, CA 92618-1922 6 Morgan, Suite 156
Phone:	Irvine, CA 92618-1922 (949) 340-0713
Fax:	(949) 829-0395
Related Dockets:	
011383-TI	Application for certificate to provide interexchange telecommunications service by LightDial, Corp.

**COMPANY IDENTIFICATION**

Printed on 04/18/2003 at 11:52:10 by PJI

Complete Name: LightDial, Corp.

Mailing Name: LightDial, Corp.

Company Code: TJ598                      FEID Number: 33-0981334

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

Reg. Date:	01/02/2002	Inactive Date:	
Service:	IXC - Interexchange 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
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Last modification was made on Thursday, December 5, 2002 at 9:55 AM by Jackie Knight

Period covered:	01/01/2002 through 12/31/2002	RAF rate:	
Operating rev:	\$0.00	Interstate rev:	\$0.00
Documents:	Delinquent letter mailed on 02/19/2003		
	RAF form mailed on 12/05/2002		