

Case Assignment and Scheduling Record

Section 1 - Bureau of Records and Hearing Services Completes

Docket No. 030274-TC Date Docketed: 03/18/2003 Title: Request for cancellation of PATS Certificate No. 7987 by Toll Call Inc., effective 2/27/03.
 Company: Toll Call, Inc.

Official Filing Date: _____
 Last Day to Suspend: _____ Expiration: _____

Referred to: _____ AUS CAF CCA (CMP) ECR EXT GCL MMS PIF
 ("()") indicates OPR _____ X _____ X _____

Section 2 - OPR Completes and returns to CCA in 10 workdays.

Time Schedule

Program/Module B1(f)

Staff Assignments

OPR Staff _____

Staff Counsel _____

OCRs () _____

() _____

() _____

() _____

() _____

() _____

Recommended assignments for hearing and/or deciding this case:

Full Commission _____ Commission Panel _____
 Hearing Examiner _____ Staff _____

Date filed with CCA: _____

Initials: OPR _____
 Staff Counsel _____

WARNING: THIS SCHEDULE IS AN INTERNAL PLANNING DOCUMENT. IT IS TENTATIVE AND SUBJECT TO REVISION. FOR UPDATES CONTACT THE RECORDS SECTION: (850) 413-6770
 Current CASR revision level

0

Due Dates

Previous Current

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Section 3 - Chairman Completes

Assignments are as follows:

- Hearing Officer(s)

Commissioners						Hrg. Exam.	Staff
ALL	JB	DS	BZ	BD	DV		

- Prehearing Officer

Commissioners					ADM
JB	DS	BZ	BD	DV	

DOCUMENT NO.

14099-03

Where panels are assigned the senior Commissioner is Panel Chairman; the identical panel decides the case.
 Where one Commissioner, a Hearing Examiner or a Staff Member is assigned the full Commission decides the case.

Approved: _____

Date: / /

Case Assignment and Scheduling Record

Section 1 - Bureau of Records and Hearing ices Completes

Docket No. 030274-TC Date Docketed: 03/18/2003 Title: Request for cancellation of PATS Certificate No. 7987 by Toll Call Inc., effective 2/27/03.
Company: Toll Call, Inc.

Official Filing Date: _____
Last Day to Suspend: _____ Expiration: _____

Referred to: _____ AUS CAF CCA (CMP) ECR EXT GCL MMS PIF
("()" indicates OPR) _____ X _____ X _____

Section 2 - OPR Completes and returns to CCA in 10 workdays. Time Schedule

Program/Module B1(f)

Staff Assignments
OPR Staff T Williams

Staff Counsel V McKay

OCRs ()
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WARNING: THIS SCHEDULE IS AN INTERNAL PLANNING DOCUMENT.
IT IS TENTATIVE AND SUBJECT TO REVISION.
FOR UPDATES CONTACT THE RECORDS SECTION: (850) 413-6770
Current CASR revision level

0

- 1. Memo to Docket File
- 2. Administrative Order
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
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- 13.
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- 33.
- 34.
- 35.
- 36.
- 37.
- 38.
- 39.
- 40.

Due Dates

Previous	Current
NONE	04/03/2003
NONE	04/18/2003

Recommended assignments for hearing and/or deciding this case:

Full Commission _____ Commission Panel _____
Hearing Examiner _____ Staff X

Date filed with CCA: 03/25/2003

Initials: OPR _____
Staff Counsel _____

Section 3 - Chairman Completes

Assignments are as follows:

- Hearing Officer(s)

Commissioners						Hrg. Exam.	Staff
ALL	JB	DS	BZ	BD	DV		X

- Prehearing Officer

Commissioners					ADM
JB	DS	BZ	BD	DV	X

Where panels are assigned the senior Commissioner is Panel Chairman; the identical panel decides the case.
Where one Commissioner, a Hearing Examiner or a Staff Member is assigned the full Commission decides the case.

Approved: _____
Date: 03/25/2003

STATE OF FLORIDA

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



DIVISION OF THE COMMISSION CLERK &
ADMINISTRATIVE SERVICES
BLANCA S. BAYÓ
DIRECTOR
(850) 413-6770 (CLERK)
(850) 413-6330 (ADMIN)

Public Service Commission

March 20, 2003

Jacque Wood
Toll Call, Inc.
6000 Live Oak Parkway, Suite 111-A
Norcross, Georgia 30093-1732

Re: Docket No. 030274-TC

Dear Mr. Wood:

This will acknowledge receipt of a request for cancellation of PATS Certificate No. 7987 by Toll Call Inc., effective 2/27/03, which was filed in this office on March 18, 2003, and assigned the above-referenced docket number. Appropriate staff members will be advised.

Mediation may be available to resolve any dispute in this docket. If mediation is conducted, it does not affect a substantially interested person's right to an administrative hearing. For more information, contact the Office of General Counsel at (850) 413-6248 or FAX (850) 413-7180.

Division of the Commission Clerk and Administrative Services
Florida Public Service Commission

DOCUMENT NO.

14099-03

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

Internet E-mail: contact@psc.state.fl.us

CCA Official Filing:

4/17/03*****2:02 PM*****Matilda Sanders*****1

Matilda Sanders

0513 - FOF

From: LaSandra Givens
Sent: Thursday, April 17, 2003 1:27 PM
To: CCA - Orders / Notices
Subject: Order / Notice Submitted

3

Date and Time: 4/17/03 1:27:00 PM
Docket Number: 030274-tc
Filename / Path: 030274.vsm

order canceling pay telephone certificate

11/0

Paula Isler

From: Paula Isler
Sent: Monday, June 17, 2002 10:26 AM
To: Jackie Knight
Subject: RAF System

Hey, Jackie. This will follow up our conversation. The following companies have not been sent a 2001 RAF return form. As I mentioned on the phone, I printed out the payphone RAF forms (the TG company codes) and was going to send them out with a letter explaining the delay in sending out the notices. However, when I went back into the RAF System, it still showed "none" in the year field and there was no Payment History showing a form had been printed. Because of that, I do not believe it is proper for me to mail the forms to the companies. Please let me know what Fiscal decides. Thanks!

TG836
TG845
TG851
TG853
TG854
TG857
TJ508
TJ531
TJ565
TJ574
TJ577
TJ579
TJ581
TJ583
TJ584
TJ585
TJ587
TJ590
TJ591
TJ596
TJ602
TS192
TX611
TX613
TX615
TX617
TX620
TX666



25-4.0161 Regulatory Assessment Fees; Telecommunications Companies.

(1) As applicable and as provided in s. 350.113, F.S., and s. 364.336, F.S., each company shall remit a fee based upon its gross operating revenue as provided below. This fee shall be referred to as a regulatory assessment fee, and each company shall pay a regulatory assessment fee in the amount of 0.0015 of its gross operating revenues derived from intrastate business. For the purpose of determining this fee, each telecommunications company shall deduct from gross operating revenues any amount paid to another telecommunications company for the use of any telecommunications network to provide service to its customers. Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed.

(2) Telecommunications companies that owed gross regulatory assessment fees of \$10,000 or more for the preceding calendar year shall pay the fee and remit the appropriate form twice a year. The regulatory assessment fee and appropriate form shall be filed no later than July 30 for the preceding period of January 1 through June 30, and no later than January 30 of the following year for the period of July 1 through December 31. Telecommunication companies that owed gross regulatory assessment fees of less than \$10,000 for the preceding calendar year shall pay the fee and remit the appropriate form once a year. The regulatory assessment fee and appropriate form shall be filed no later than January 30 of the subsequent year for the current calendar year operations.

(3) If the due date falls on a Saturday, Sunday, or legal holiday, the due date is extended to the next business day. If the fees are sent by registered mail, the date of the registration is the United States Postal Service's postmark date. If the fees are sent by certified mail and the receipt is postmarked by a postal employee, the date on the receipt is the United States Postal Service's postmark date. The postmarked certified mail receipt is evidence that the fees were delivered. Regulatory assessment fees are considered paid on the date they are post marked by the United States Postal Service or received and logged in by the Commission's Division of Administration in Tallahassee. Fees are considered timely paid if properly addressed, with sufficient postage, and postmarked no later than the due date.

(4) Commission Form PSC/CMU 25 (11/99), entitled "Local Exchange Company Regulatory Assessment Fee Return,"; Form PSC/CMU 26 (11/99), entitled "Pay Telephone Service Provider Regulatory Assessment Fee Return"; Form PSC/CMU 34 (11/99), entitled "Shared Tenant Service Provider Regulatory Assessment Fee Return"; Form PSC/CMU 153 (11/99), entitled "Interexchange Company Regulatory Assessment Fee Return"; and Form PSC/CMU 1 (11/99), entitled "Alternative Access Vendor Regulatory Assessment Fee Return"; and Form PSC/CMU 7 (11/99), entitled "Alternative Local Exchange Company Regulatory Assessment Fee Return" are incorporated into this rule by reference and may be obtained from the Commission's Division of Administration.

(5) Each telecommunications company shall have up to and including the due date in which to submit the applicable form and:

- (a) Remit the total amount of its fee or
- (b) Remit an amount which the company estimates is its full fee.

(6) Where the company remits less than its full fee, the remainder of the full fee shall be due on or before the 30th day from the due date and shall, where the amount remitted was less than 90 percent of the total regulatory assessment fee, include interest as provided by subsection (8)(b) of this rule.

(7) A company may request from the Division of Administration a 30-day extension of its due date for payment of regulatory assessment fees or for filing its return form.

(a) The request for extension must be written and accompanied by a statement of good cause.

(b) The request for extension must be received by the Division of Administration at least two weeks before the due date.

(c) Where a telecommunications company receives an extension of its due date pursuant to this rule, the telecommunications company shall remit a charge in addition to the regulatory assessment fees, as set out in s. 350.113(5), F.S.

(d) The return forms may be obtained from the Commission's Division of Administration. The failure of a telecommunications company to receive a return form shall not excuse the company from its obligation to timely remit the regulatory assessment fees.

(8) The delinquency of any amount due to the Commission from the telecommunications company pursuant to the provisions of s. 350.113, F.S., and this rule, begins with the first calendar day after any date established as the due date either by operation of this rule or by an extension pursuant to this rule.

(a) A penalty, as set out in s. 350.113, F.S., shall apply to any such delinquent amounts.

(b) Interest at the rate of 12 percent per annum shall apply to any such delinquent amounts.

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

Law Implemented: 350.113, 364.336, F.S.

History: New 5/18/83, formerly 25-4.161, Amended 10/16/86, 01/01/91, 12/29/91, 01/08/95, 12/26/95, 07/08/96, 11/11/99.

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- _____ Actual Return
- _____ Estimated Return
- _____ Amended Return

PERIOD COVERED:
12/28/2001 TO 12/31/2001

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TG853-01-0-R
Live Wire Systems, Inc.
2787 East Oakland Park Blvd., #209
Ft. Lauderdale, FL 33306-1631

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. _____