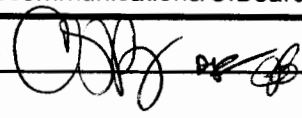


REQUEST TO ESTABLISH DOCKET

(Please type or print. File original *plus* 1 copy with CLK.)

Date:	1/9/2014	Docket No.:	DOCKET NO. 140015-TC
1. From Division / Staff:	Office Of Telecommunications/C.Beard, J.Bates		
2. OPR:	Catherine Beard, Jeff Bates, TEL 		
3. OCR:	GCO		
4. Suggested Docket Title:	Request for cancellation of pay telephone certificate No. TG167 by PalmTel, Inc., effective March 28, 2013.		
5. Program/Module/Submodule Assignment:	B.1(K)		
6. Suggested Docket Mail List.			
a. Provide NAMES/ACRONYMS, if registered company.		<input type="checkbox"/> Provided as an Attachment	
Company Code, if applicable:	Parties (include address, if different from MCD):	Representatives (name and address):	
TG167			
b. Provide COMPLETE NAME AND ADDRESS for all others. (match representatives to companies)			
Company Code, if applicable:	Interested persons, if any, (include address, if different from MCD):	Representatives (name and address):	
7. Check one:	<input checked="" type="checkbox"/> Supporting Documentation Attached		<input type="checkbox"/> To be provided with Recommendation
Comments: Company requested cancellation by letter included in the RAF payment in March of 2013. That request was not forwarded to TEL to docket for staff assignment to be cancelled. That letter is in the documentation attached.			

Catherine Beard

From: Bob Casey
Sent: Thursday, January 02, 2014 9:34 AM
To: Catherine Beard; Jeff Bates
Cc: Bob Casey; Toni Earnhart
Subject: FW: PalmTel, Inc. TG167 (Email 2)
Attachments: tg167-13-0-r-0

Follow Up Flag: Follow up
Flag Status: Flagged

Please open docket and cancel per attached letter to the RAF return.

See Toni's e-mail below...

Thanks.

From: Toni Earnhart
Sent: Thursday, January 02, 2014 9:32 AM
To: Bob Casey
Subject: PalmTel, Inc. TG167 (Email 2)

Bob,

The request was received by FISCAL, per the post mark, March 28, 2013 when the 2013 RAF was paid. This should be the company's cancellation effective date.

Fiscal missed forwarding the cancellation request to the Clerk for docketing and staff assignment.

Please ask staff to expedite the cancellation so a delinquent letter is not triggered by the new RAF system.

If possible, ask staff to try and have Legal file the Administrative Order before January 30, 2014.

Thank you,

***Toni Joy Earnhart, Public Utility Analyst
Florida Public Service Commission
2540 Shumard Oak Blvd.
Tallahassee, FL 32399
Phone 850-413-6532
Fax 850-413-6533***

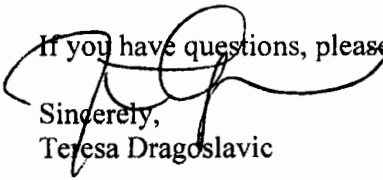
March 27, 2013

Florida Public Service Commission
2540 Shumard Oak Blvd
Tallahassee, FL 32399-0850
Attn:Fiscal Services/Ann Cole Comm Clerk

Dear Commission

Please accept this notice that PalmTel, Inc TG167 voluntarily requests the cancellation of the Pay Telephone Certificate required. PalmTel no longer has an inventory of public payphones available to the public. I have attached the 2012 and 2013 RAF documents with checks to cover the fees and penalty.

If you have questions, please reach me at 954 524 9999.


Sincerely,
Teresa Dragoslavic

Pay Telephone Service Provider Regulatory Assessment Fee Return

Total \$ 212.00

Florida Public Service Commission

FOR PSC USE ONLY	
Check #	302681
\$	100.00 06-03-001
	003001
\$	E
\$	P 06-03-001
	004011
\$	I
Postmark Date	3-28-13
Initials of Preparer	RT

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TG167-13-0-R
 PalmTel, Inc.
 3108 N.E. 22nd Street
 Ft. Lauderdale, FL 33305-1828

DATE DEPOSIT

APR 02 2013 3 21

PERIOD COVERED:
 01/01/2013 TO 12/31/2013

Please Complete Below If Official Mailing Address Has Changed

(Name of Company)	(Address)	(City/State)	(Zip)
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LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 0
2.	Gross Intrastate Revenue	0
3.	Less: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (see "2. Fees" on back)	(0)
4.	TOTAL REVENUES for Regulatory Assessment Fee Calculation (Line 2 less Line 3)	\$ 100-
5.	REGULATORY ASSESSMENT FEE DUE - (Multiply Line 4 by 0.0016. If more than \$100, enter amount. If less, enter \$100.) ⁽²⁾	
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.	Extension Payment Fee (see "4. Extension" on back)	
9.	TOTAL AMOUNT DUE (Add lines 5 through 8)	\$ 100-
10.	Number of pay telephones in operation at close of period covered by this Return	-0-

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$100 shall be imposed as provided in Section 364.336, Florida Statutes.

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) off mgr (Title) 3/27/13 (Date)
Teri Kravoslavic (Preparer of Form - Please Print Name) Telephone Number 9545249949 Fax Number 9545243414
 F.E.I. No. 65-070-7044

TO AVOID PENALTY AND INTEREST CHARGES, THE REGULATORY ASSESSMENT FEE RETURN MUST BE FILED ON OR BEFORE 1/30/2014
Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

STATUS:

- Actual Return
- Estimated Return
- Amended Return

(See Filing Instructions on Back of Form)

TG167-13-T-0-R
 PalmTel, Inc.
 3108 N.E. 22nd Street
 Ft. Lauderdale FL 33305-1828

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY
 Check # No check Rec'd
 \$ _____ 06-03-001
 \$ _____ 003001
 \$ _____ E
 \$ _____ P 06-03-001
 \$ _____ 004011
 \$ _____ I
 Postmark Date _____
 Initials of Preparer _____

PERIOD COVERED:
 1/1/2013 TO 12/31/2013

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

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ <u>-0-</u>
2.	Gross Intrastate Revenue	_____
3.	Less: Amounts Paid to Other Telecommunications Companies ⁽¹⁾ (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 0.0016. If more than \$100, enter amount. If less, enter \$100.) ⁽²⁾	_____
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.	Extension Payment Fee (see "4. Extension" on back)	_____
9.	TOTAL AMOUNT DUE (Add lines 5 through 8)	\$ <u>-0-</u>
10.	Number of pay telephones in operation at close of period covered by this Return	<u>-0-</u>

*COMPANY
 INACTIVE
 CLOSED*

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$100 shall be imposed as provided in Section 364.336, Florida Statutes.

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] _____ Pres _____ 12/18/13
 (Signature of Company Official) (Title) (Date)

Terrin Dragoslawic Telephone Number 954 524 9999 Fax Number ()
 (Preparer of Form - Please Print Name)

F.E.I. No. 65-070-7044

COMPANY IDENTIFICATION

Printed on 01/09/2014 at 16:55:37 by CSB

Complete Name: PalmTel, Inc.

Mailing Name: PalmTel, Inc.

Company Code: TG167

FEID Number: 65-0707044

RAF ACCOUNT FOR THE PERIOD 01/01/2013 THROUGH 12/31/2013

Reg. Date: 10/08/1997 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: 0.0016

Assessment	Due	Paid	Owe
RAF	\$100.00	\$100.00	\$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	\$100.00	\$100.00	\$0.00

Last modification was made on Tuesday, April 2, 2013 at 2:03 PM by Valorie Moore