

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

#4868
\$10000
LAF

1. LEGAL NAME OF THE APPLICANT

William G. Flippo 960683-TC

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS

Ward F Express Inc

3. ADDRESS OF THE APPLICANT(S)

STREET

1323 Pierce St

CITY

Hollywood

STATE & ZIP

FL 33019

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:
OWN NAME.

3744

DOCUMENTATION: No other documentation needed.

DEPOSIT TRES. REV. DATE

B. PARTNERSHIP:

0 JUN - 3 '96

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been filed with the Florida Secretary of State's Office. If incorporated outside of Florida, attach proof from the Florida Secretary of State that applicant has authority to operate in Florida and provide name and address of Florida Registered Agent.

NAME _____

ADDRESS _____

D. DOING BUSINESS UNDER A FICTITIOUS NAME:

DOCUMENTATION: Attach proof that fictitious name has been registered with the Florida Secretary of States Office.

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5. PROVIDE NAME, TITLE, AND TELEPHONE NUMBER OF THE INDIVIDUAL WHO IS RESPONSIBLE FOR COMMISSION CONTACTS:

NAME: Marrie Flippo
TITLE: Secr of Treasurer
PHONE: 954-923-3001

6. HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY SHAREHOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED A PAY TELEPHONE CERTIFICATE IN THE STATE OF FLORIDA? THIS INCLUDES ACTIVE AND CANCELLED PAY TELEPHONE CERTIFICATES.

NO

7. IF THE ANSWER TO QUESTION 6 IS YES, PLEASE EXPLAIN AND LIST THE CERTIFICATE HOLDER AND CERTIFICATE NUMBER.

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

Florida

B. HAS APPLICATIONS PENDING TO BE CERTIFICATED AS A PAY TELEPHONE PROVIDER.

C. HAS BEEN DENIED AUTHORITY TO OPERATE AS A PAY TELEPHONE PROVIDER. EXPLAIN CIRCUMSTANCES.

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

LOCAL
LONG DISTANCE
COIN
CALLING CARD
CREDIT CARD
OTHER, DESCRIBE

[X X X X]

10. PROPOSED NUMBER OF PAY TELEPHONE INSTRUMENTS THE APPLICANT PLANS TO PLACE IN THE FIRST YEAR: 2

11. HOW DOES THE APPLICANT INTEND TO SERVICE AND MAINTAIN EACH PAYPHONE?

PERSONALLY
FULL-TIME TECHNICIAN
PART-TIME TECHNICIAN
SERVICE/REPAIR/MAINTENANCE CONTRACT
OTHER, DESCRIBE

[X]

12. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL PROVIDE ACCESS TO ALL LOCALLY AVAILABLE LONG DISTANCE CARRIERS VIA 10XXX+0, 950-XXXX, AND 1-800? (See Rule 25-24.515(6), F.A.C.)

YES

13. WILL EACH OF THE PAY TELEPHONES WHICH YOU PLAN TO INSTALL CONFORM TO SUBSECTIONS 4.29.2 - 4.29.4 and 4.29.7 - 4.29.8 OF THE AMERICAN NATIONAL STANDARDS SPECIFICATIONS FOR MAKING BUILDINGS AND FACILITIES ACCESSIBLE AND USABLE BY PHYSICALLY HANDICAPPED PEOPLE (ATTACHMENT F)? (See Rule 25-24.515(14), F.A.C.)

YES

I, THE UNDERSIGNED OWNER OR OFFICER OF THE ABOVE NAMED ENTITY, HAVE READ THE FOREGOING AND DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION IS A TRUE AND CORRECT STATEMENT. I AM AWARE THAT PURSUANT TO s. 837.06, FLORIDA STATUTE, 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. I WILL COMPLY WITH ALL CURRENT AND FUTURE COMMISSION REQUIREMENTS REGARDING THE PAY TELEPHONE SERVICE. I UNDERSTAND THAT A NON-REFUNDABLE APPLICATION FEE OF \$100 MUST ACCOMPANY THE APPLICATION. ALSO, I UNDERSTAND THAT I AM REQUIRED TO PAY A REGULATORY ASSESSMENT FEE (MINIMUM \$50.00 PER CALENDAR YEAR), FILE AN ANNUAL PAY TELEPHONE SERVICE REPORT, AND PAY GROSS RECEIPTS TAX. FURTHERMORE, I AGREE TO KEEP THE COMMISSION ADVISED OF ANY CHANGES IN THE NAMES OR ADDRESSES LISTED ABOVE WITHIN TEN (10) DAYS OF THE CHANGE.


W.G. Flippe

(SIGNATURE OF OWNER/CHIEF OFFICER OF APPLICANT)

DATE: 5-29-96

APPLICANT ACKNOWLEDGEMENT CARD

Applicant Willem G Flippo

I acknowledge receipt and understanding of the Florida Public Service Commission's Rules and Requirements relating to my provision of Pay Telephone Service.

Signature  W.G. Flippo

Title President

Date 5-29-96

THIS MUST BE COMPLETED AND RETURNED WITH THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.



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The following information is provided for the year 1967. The total number of records is 1234. The number of records for each month is as follows: January: 10, February: 15, March: 20, April: 25, May: 30, June: 35, July: 40, August: 45, September: 50, October: 55, November: 60, December: 65.

The following information is provided for the year 1968. The total number of records is 1345. The number of records for each month is as follows: January: 11, February: 16, March: 21, April: 26, May: 31, June: 36, July: 41, August: 46, September: 51, October: 56, November: 61, December: 66.

The following information is provided for the year 1969. The total number of records is 1456. The number of records for each month is as follows: January: 12, February: 17, March: 22, April: 27, May: 32, June: 37, July: 42, August: 47, September: 52, October: 57, November: 62, December: 67.

The following information is provided for the year 1970. The total number of records is 1567. The number of records for each month is as follows: January: 13, February: 18, March: 23, April: 28, May: 33, June: 38, July: 43, August: 48, September: 53, October: 58, November: 63, December: 68.

The following information is provided for the year 1971. The total number of records is 1678. The number of records for each month is as follows: January: 14, February: 19, March: 24, April: 29, May: 34, June: 39, July: 44, August: 49, September: 54, October: 59, November: 64, December: 69.

The following information is provided for the year 1972. The total number of records is 1789. The number of records for each month is as follows: January: 15, February: 20, March: 25, April: 30, May: 35, June: 40, July: 45, August: 50, September: 55, October: 60, November: 65, December: 70.

The following information is provided for the year 1973. The total number of records is 1900. The number of records for each month is as follows: January: 16, February: 21, March: 26, April: 31, May: 36, June: 41, July: 46, August: 51, September: 56, October: 61, November: 66, December: 71.

The following information is provided for the year 1974. The total number of records is 2011. The number of records for each month is as follows: January: 17, February: 22, March: 27, April: 32, May: 37, June: 42, July: 47, August: 52, September: 57, October: 62, November: 67, December: 72.

State of Florida



Department of State

IN WITNESS WHEREOF, the Governor of the State of Florida, has hereunto set his hand and the seal of the State of Florida, at Tallahassee, this 1st day of January, 1900.

Wm. M. Smith
Governor



Wm. M. Smith
Governor

Wm. M. Smith
Secretary of State

ORDER NO. PSC-95-1023-FOF-TP
DOCKET NO. 950107-TP
PAGE 2

(S E A L)

25-24.516 Non-Local Exchange Company Pay Telephone Rate Caps

(1) Rates charged any end user by a pay telephone provider shall not exceed the following:

(a) local coin calls - a rate equivalent to the local coin rate of the local exchange telecommunications company, except that a provider using a debit card system may charge \$1.00 for a sent paid local call made from a pay telephone located in a confinement facility:

(b) intraLATA and interLATA toll coin calls - a rate of \$.25 per minute, plus a \$1.00 surcharge:

(c) 0+ and 0- interLATA toll non-coin calls billed directly or on behalf of the pay telephone provider - a rate of \$.25 per minute, plus the Commission authorized set use fee as described in subsection (3) below, plus a \$1.00 surcharge.

(2) A pay telephone provider shall not obtain services from an interexchange carrier or an operator service provider unless such carrier or provider has obtained a certificate of public convenience and necessity from the Commission.

(3) A set use fee of \$.25 shall apply to all completed 0+ and 0- local and intraLATA toll calls placed from pay telephones. A \$.25 set use fee may optionally be applied to completed 0+ and 0- interLATA toll calls.

Specific Authority: 350.127(2)F.S.

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

4255
#10000
960683-TC Lat

1. LEGAL NAME OF THE APPLICANT
Willem G. Flippo

2. NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS
W and F Express Inc

3. ADDRESS OF THE APPLICANT(S)
STREET 1323 Pierce St
CITY Hollywood
STATE & ZIP FL 33019

4. TYPE OF ORGANIZATION (CHECK ONE)

A. INDIVIDUAL DOING BUSINESS UNDER HIS/HER:
OWN NAME.

DOCUMENTATION: No other documentation needed. DEPOSIT TRESAS REF DATE

B. PARTNERSHIP: JUN - 3 '96

DOCUMENTATION: Attach a copy of the partnership agreement, and a list with the name and address of all partners.

C. CORPORATION:

DOCUMENTATION: Attach proof that articles of incorporation have been

RECEIVED
MAY 31 AM 7:54
MAIL ROOM

W & F EXPRESS, INC.
DBA DAVIE JUNCTION
TAX ID #16-11-206882-09
6311 SW. 45TH ST.
DAVIE, FL 33314

4868

DATE 5/29-96

62-1264
670

PAY TO THE ORDER OF Florida Public Service Commission \$ 100.00
one hundred DOLLARS

Family Bank

6491 South State Road 7
Davie, Florida 33314

FOR Application See Telephone

State of Florida

Commissioners:
SUSAN F. CLARK, CHAIRMAN
J. TERRY DEASON
JULIA L. JOHNSON
DIANE K. KIESLING
JOE GARCIA



DIVISION OF RECORDS &
REPORTING
BLANCA S. BAYO
DIRECTOR
(904) 413-6770

Public Service Commission

June 4, 1996

Mr. Willem G. Flippo
c/o W & F Express, Inc.
1323 Pierce Street
Hollywood, Florida 33019

Re: Docket No. 960683-TC

Dear Mr. Flippo:

This will acknowledge receipt of an application for certificate to provide pay telephone service by W & F EXPRESS, INC., which was filed in this office on May 31, 1996 and assigned the above-referenced docket number. Appropriate staff members will be advised.

Sincerely,

A handwritten signature in black ink that reads "Linda C. Williams".

Linda C. Williams
Commission Deputy Clerk Supervisor