



210 N. Park Ave.
Winter Park, FL
32789

P.O. Drawer 200
Winter Park, FL
32790-0200

Tel: 407-740-8575
Fax: 407-740-0613
tmi@tminc.com

December 8, 1998
Via Overnight

DEPOSIT DATE
D044 DEC 10 1998

RECEIVED
FLORIDA PUBLIC
SERVICE COMMISSION
MAIL ROOM
98 DEC 10 PM 12:04

981836-TL

Ms. Blanca Bayo, Director
Florida Public Service Commission
Division of Records and Reporting
2540 Shumard Oak Boulevard
Gerald L. Gunter Building, Room 270
Tallahassee, FL 32399-0870

RE: Initial Application and Tariff of Public Payphone U.S.A., Inc. for Authority to Provide Pay Telephone Service within the State of Florida.

Dear Mr. D'Haeseleer:

Enclosed for filing are six (6) copies of the above-referenced application of Public Payphone U.S.A., Inc. for authority to provide pay telephone service within the state of Florida. Also enclosed is a check in the amount of \$100 for the filing fee.

The original of this application signed by Mr. Joe Pekarovic was previously filed as an attachment to the Application of Public Payphone U.S.A., Inc. for Authority to Provide Interexchange Services (Docket No. 981491-TI). At the request of Commission Staff, the enclosed application is re-filed to insure separate docketing of the company's pay telephone service application.

Please acknowledge receipt of this filing by returning, filed stamped, the extra copy of this letter in the self-addressed stamped envelope.

I may be reached at (407) 740-8575 with any questions, comments or correspondence regarding this application. Thank you for your assistance in this matter.

Sincerely,

Monique Byrnes
Consultant to
Public Payphone U.S.A., Inc.

cc: Dave Goodman - PCS
file: PCS, FL - COCOT
tms: FLP9800

Check received with filing and forwarded to Fiscal for deposit.
Fiscal to forward a copy of check to RAR with proof of deposit.

Initials of person who forwarded check:
A.J.

DOCUMENT NO.

13950-98

12-10-98



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Initials of person who forwarded check:
H.J.

DOCUMENT NO.

13130-98

12-10-98



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TECHNOLOGIES MANAGEMENT, INC.
P.O. DRAWER 200
WINTER PARK, FL 32790-0200



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cc: Dave Goodman - PCS
file: PCS, FL - COCOT
tms: FLP9800

FLORIDA PUBLIC SERVICE COMMISSION

Application Form

For

Certificate to Provide Pay Telephone Service
Within the State of Florida

- A. This form is used for an original application for a certificate to provide pay telephone service within the State of Florida.
- B. A \$100 non-refundable application fee along with the enclosed Applicant Acknowledgment Card must be completed and accompany the Application before processing will begin.
- C. Once a certificate has been granted, regulatory assessment fees will be due for that calendar year regardless of whether or not pay telephones have been installed.
- D. When completing the application, respond to each item. If an item is not applicable, explain why. Failure to respond to any item will result in the application being returned and a delay in the application process.
- E. Use a separate sheet for each answer which will not fit the allotted space.
- F. If you have any questions about completing the form, contact the Certificate Section at 904\488-1280 or write:

Florida Public Service Commission
Division of Communications
101 East Gaines Street
Tallahassee, Florida 32399-0866

- G. Once completed, the original plus five (5) copies of this form, along with \$100 application fee, are to be submitted to:

Florida Public Service Commission
Division of Communications
101 East Gaines Street
Tallahassee, Florida 32399-0866

FLORIDA PAY TELEPHONE CERTIFICATE APPLICATION

1. **LEGAL NAME OF THE APPLICANT**

Public Payphone U.S.A., Inc.

2. **NAME UNDER WHICH THE APPLICANT WILL DO BUSINESS**

Public Payphone U.S.A., Inc.

3. **ADDRESS OF THE APPLICANT(S)**

STREET 11859 Wilshire Blvd., Suite 600
CITY Los Angeles
STATE & ZIP California 90025

4. **TYPE OF ORGANIZATION (CHECK ONE)**

- A. **INDIVIDUAL DOING BUSINESS UNDER HIS/HER:**
OWN NAME.
DOCUMENTATION: No other documentation needed.
- B. **PARTNERSHIP:**
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.

See Attachment I.

NAME NRAI Services, Inc.

ADDRESS 526 East Park Avenue
Tallahassee, FL 32301

- D. **DOING BUSINESS UNDER A FICTITIOUS NAME:**
DOCUMENTATION: Attach proof that fictitious name has been registered
with the Florida Secretary of States Office.

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

NAME: David Goodman

TITLE: Vice President, Customer Service Manager

PHONE: (310) 473-6222

6. **HAS APPLICANT OR ANY SUBSIDIARY, PARTNER, OFFICER, DIRECTOR, ETC., OR IN THE CASE OF A CLOSELY HELD CORPORATION ANY CHARGE HOLDER OF THE APPLICANT EVER BEEN GRANTED OR DENIED 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.**

Not applicable.

8. **LIST THE STATES IN WHICH THE APPLICANT:**

A. **IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE**

None.

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

None.

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

None.

D. **HAS HAD REGULATORY PENALTIES IMPOSED FOR VIOLATIONS OF TELECOMMUNICATIONS STATUTES. EXPLAIN CIRCUMSTANCES.**

None.

9. PLEASE CHECK THE SERVICES THAT WILL BE PROVIDED:

- LOCAL
- LONG DISTANCE
- COIN
- CALLING CARD
- CREDIT CARDS
- OTHER, DESCRIBE

Public Payphone U.S.A., Inc. ("Public Payphone") also proposes to offer automated collect-only long distance services for inmates of confinement institutions.

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

At this time, Public Payphone U.S.A., Inc. ("Public Payphone") has no specific projections concerning the locations or number of instruments it plans to install during its first year of operation. The Company has not completed development of its marketing program for payphone services offered to the general public.

With regards to inmate services, the Company's business plans call for Public Payphone to respond to requests for proposals (RFPs) from various city, county and state agencies seeking to install telecommunications services for their inmate populations. Public Payphone U.S.A., Inc. files this application in order to be prepared to offer service should it respond and win a bid from an institution within the state of Florida. The actual number of telephone instruments installed at any given location will vary based on the size of the institution served, the number of prisoners, and type of inmate calling privileges, all of which are site specific.

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

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

Payphones available to the general public will be maintained under contract with a third party maintenance company until the number of instruments within the state justifies a full-time technician hired as an employee of the Company.

For inmate services, call processing equipment installed at prisons or confinement institutions is equipped with remote on-line diagnostics. This capability allows Public Payphone's in-house technicians to communicate via dial up data modem with each system

at any correctional facility. Public Payphone can troubleshoot and effect many operational changes to a system without having to be on site.

On-site repairs, such as replacement of telephone instruments or handsets, will be performed by a local telecommunications firm under contract. This subcontractor will be carefully selected based on its technical expertise and ability to respond to trouble calls.

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.)**

Pay telephones available to the general public will allow the user to access all locally available long distance carriers. However, for services provided to inmates of prisons and other confinement institutions, access will be limited to long distance services offered by Public Payphone U.S.A., Inc..

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(4), F.A.C.)**

Yes, for pay telephones available to the general public. Handicap accessibility of pay telephones provided to inmates will be subject to the requirements of the institution's administration.

I, Joe Pekarovic,

ATTEST TO THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION AND HAVE READ ALL THE RULES AND REGULATIONS REGARDING PAY PHONE SERVICE IN FLORIDA. I WILL COMPLY WILL 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.



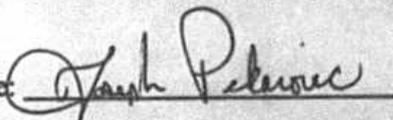
(SIGNATURE OF OWNER/OFFICER OF APPLICANT)

DATE: 10/26/98.

APPLICANT ACKNOWLEDGMENT CARD

Applicant: **Public Payphone U.S.A., Inc.**

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

Signature: 

Title: **Vice President of Sales, Public Payphone U.S.A., Inc.**

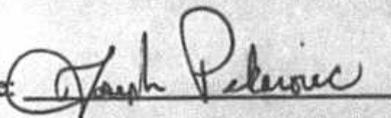
Date: 10/26/98

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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Applicant: **Public Payphone U.S.A., Inc.**

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

Signature: 

Title: **Vice President of Sales, Public Payphone U.S.A., Inc.**

Date: 10/26/98

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.

Attachment I

Public Payphone U.S.A., Inc.

Certificate of Authority

to transact business within the State of Florida

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Public Payphone U.S.A. Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Nevada
(State or country under the law of which it is incorporated)
3. 88-0290604
(FEI number, if applicable)
4. July 27, 1992
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 11859 Wilshire Blvd, #600
Los Angeles, CA 90025
(Current mailing address)

8. Long Distance Telecommunication Services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
- Name: NRAI Services, Inc.
- Office Address: 526 E. Park Avenue
Tallahassee, Florida, 32301
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Tina Leland

(Registered agent's signature)

Tina Leland-Ass't. Sec. of NRAI Services, Inc.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary or State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

FILED
 SECRETARY OF STATE
 DIV. OF CORPORATIONS
 98 MAY - 1 AM 11:24

(Post office box only - P.O. Box NOT acceptable)

Chairman: Joseph Fryzer
Address: 11859 Wilshire Blvd., Ste. 600, Los Angeles, CA 90025

Vice Chairman: Paul S. Jennings
Address: 11859 Wilshire Blvd., Ste. 600, Los Angeles, CA 90025

Director:
Address:

Director:
Address:

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Joseph Fryzer
Address: 11859 Wilshire Blvd., Ste.600, Los Angeles, CA 90025

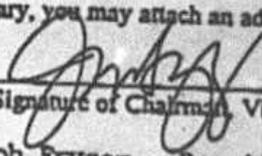
Vice President: Paul S. Jennings
Address: 11859 Wilshire Blvd., Ste.600, Los Angeles, CA 90025

Secretary: Paul S. Jennings
Address: 11859 Wilshire Blvd., Ste.600, Los Angeles, CA 90025

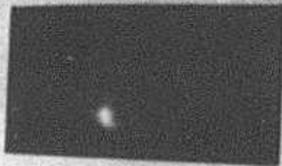
Treasurer: Paul S. Jennings
Address: 11859 Wilshire Blvd., Ste. 600, Los Angeles, CA 90025

FILED
SECRETARY OF STATE
DIVISION OF PERMITS
98 MAY - 1 AM 11:34

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Joseph Fryzer - President
(Typed or printed name and capacity of person signing application)



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TECHNOLOGIES MANAGEMENT, INC.
P.O. BOX 200
210 N. PARK AVE.
WINTER PARK, FL 32789-0200
(407) 740-8575

BARNETT BANK, N.A.
WINTER PARK, FL 32789

21683

12/9/98

PAY TO THE ORDER OF Florida Public Service Commission

\$ **100.00

One Hundred and 00/100

Florida Public Service Commission
Records & Reporting
2540 Shumard Oaks Blvd.
Tallahassee, FL 32302-1500

DOLLARS
Security features
included.
Details on back.

TECHNOLOGIES MANAGEMENT, INC.

DOCUMENT NO.
13950-98
12-10-98

MEMO Florida Public Service Commission