



Public Service Commission

-M-E-M-O-R-A-N-D-U-M-

DATE: December 29, 1998

TO: Blanco Bayo, Director, Division of Records and Reporting

FROM: Toni J. McCoy, Regulatory Analyst, Division of Communications

SUBJECT: Open Docket No. 981909-TC

Please see the attached letter dated December 28, 1998 and revised Page 2 of application to be placed in file.

Please make the necessary changes in MCD and add the phones numbers listed for TRM Communications per the letter head. The main number is 904/261-8360 and the fax number is 904/261-9387.

Thank you.

ACK _____
 AFA _____
 APP _____
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DOCUMENT NUMBER-DATE

11583 DEC 30 8

FPSC-RECORDS/REPORTING

TRM Communications

PO Box 15311
Fernandina Beach, FL 32035

Phone (904) 261-4360
Fax (904) 261-9387

December 28, 1998

Florida Public Service Commission
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850

To Whom it May Concern,

Please amend my application to include the revised information in the attached document. The information in item number 5 is the only information that has changed.

Thank you for your assistance in this matter. If you have any questions, please feel free to call me at the number listed above.

Sincerely,


Timothy R. McVeigh

FAX COVER SHEET

TRM Communications
POBOX 15311
Fernandina Beach, FL 32035

Phone number (904)281-8380
Fax number (904)281-8387

SEND TO Company name	From
Florida Public Service Commission	Timothy R. McVeigh
Attention	Date
Tony McCoy	
Office location	Office location
Fax number	Phone number
(904)13-8833	

Urgent
 Reply ASAP
 Please comment
 Please review
 For your information

Total pages, including cover: 3

COMMENTS

Tony,

Thank you so much for your help. I appreciate it.

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

NAME: TIMOTHY B. McVEIGH
TITLE: OWNER
PHONE: 904-261-8360

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 ADMITTED 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 NUMBER AND CERTIFICATE NUMBER.

8. LIST THE STATES IN WHICH THE APPLICANT:

A. IS CURRENTLY PROVIDING PAY TELEPHONE SERVICE

NONE

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

NONE

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

NONE

FORM DESIGNED BY 800-828-7828 P.02 OF 6
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