

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date: August 14, 2000

Docket No. 001128-TC

1. Division Name/Staff Name Competitive Services/Isler
2. OPR Competitive Services/Isler
3. OCR Legal Services
4. Suggested Docket Title Cancellation by Florida Public Service Commission of Pay Telephone Certificate No. 6083 issued to Wayne Wyckoff for violation of Rule No. 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.

5. Suggested Docket Mailing list (attach separate sheet if necessary)

A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.

B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

1. Parties and their representatives (if any)

<u>Wayne Wyckoff</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one:

- Documentation is attached.
 Documentation will be provided with recommendation.

Report of Delinquent Regulatory Assessment Fees

As of 07/17/2000

TG526: Wayne Wyckoff
4608 8th Avenue East
Bradenton, FL 34208-5832

Liaison: Wayne Wyckoff, (941) 744-0296

Certificates: 6083. Status is active.

Dates: Effective Date 05/21/1999
Inactive Date / /

RAF Owed: \$ Unknown 07/01/1999 through 12/31/1999
\$ Unknown 01/01/1999 through 12/31/1999

STATE OF FLORIDA

Commissioners:
JOE GARCIA, CHAIRMAN
J. TERRY DEASON
SUSAN F. CLARK
E. LEON JACOBS, JR.
LILA A. JABER



DIVISION OF
TELECOMMUNICATIONS
WALTER D'HAESELEER
DIRECTOR
(850) 413-6600

Public Service Commission

April 24, 2000

Mr. Wayne Wyckoff
4608 8th Avenue East
Bradenton, FL 34208-5832

Dear Mr. Wyckoff:

This is in response to your letter dated March 30, in which you requested voluntary cancellation of your certificate. I cannot recommend voluntary cancellation of a certificate when there is an outstanding balance of regulatory assessment fees (RAFs). Our records show that the 1999 RAF, which was due by January 31, 2000, has not been paid. You will also owe statutory penalty and interest charges. This means that you owe a total of \$59.00 (\$50.00 fee, \$7.50 penalty, and \$1.50 interest), IF your payment is postmarked by April 30. If your payment is postmarked in May, you will owe a total of \$62.00 (\$50.00 fee, \$10.00 penalty, and \$2.00 interest).

As information, until the Commission is notified in writing that a company wishes to cancel its certificate, the RAF is due on that certificate if the certificate is active for any day during a calendar year. This means that not only are the 1999 RAF, penalty and interest charges past due, but that you are also responsible for the 2000 RAF since the Commission was not notified until April 4, 2000.

I am enclosing a copy of Rule 25-24.514, F.A.C., which explains how to request voluntary cancellation. The company would need to first pay the past due amount in full, and then write the Commission a letter advising when the 2000 RAF fee will be paid. Or, you can go ahead and pay the 2000 fee of \$50.00, although it is not due until January 30, 2001. Copies of the 1999 and 2000 RAF forms are attached.

Please respond in writing by May 9, 2000. If you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, and by internet e-mail at pisler@psc.state.fl.us.

Mr. Wayne Wyckoff
Page 2
April 24, 2000

Sincerely,

A handwritten signature in black ink that reads "Paula J. Isler". The signature is written in a cursive style with a large initial "P" and a distinct "J" and "I".

Paula J. Isler, Research Assistant
Bureau of Service Evaluation & Compliance

Enclosures

Pay Telephone Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

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

TG526
 Wayne Wyckoff
 4608 8th Avenue E
 Bradenton, FL 34208-5832

PERIOD COVERED:

05/21/99 TO 12/31/99

Please Complete Below if Official Mailing Address Has Changed

FOR PSC USE ONLY

Check# _____

\$ _____ 0603002
 _____ 003001

\$ _____ P
 _____ 0603002
 _____ 004011

\$ _____ I

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. _____

FLORIDA PUBLIC SERVICE COMMISSION
Instructions For Filing Regulatory Assessment Fee Return
(Pay Telephone Service Provider)

1. **WHEN TO FILE:** For companies which owed a total of \$10,000 or more of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

*On or before July 30 for the six-month period January 1 through June 30, AND
On or before January 30 for the six-month period July 1 through December 31.*

For companies which owed a total of less than \$10,000 of assessment fee for the preceding calendar year, this Regulatory Assessment Fee Return and payment must be filed or postmarked:

On or before January 30 for the prior twelve-month period January 1 through December 31.

However, if July 30 or January 30 falls on a Saturday, Sunday, or holiday, the Regulatory Assessment Fee may be filed or postmarked on the next business day, without penalty.

2. **FEES:** Each company shall pay 0.0015 of its gross operating revenues derived from intrastate business, as referenced in Rule 25-4.0161(1), F.A.C. Gross Operating Revenues are defined as the total revenues before expenses. Gross Intrastate Operating Revenues are defined as revenues from calls originating and terminating within Florida. Do not deduct any expenses, taxes, or uncollectibles from these amounts other than the amount on Line 3.

On Line 3, deduct any amount paid to another telecommunications company for the use of any telecommunications network (including installation charges) to provide service to its customers. *Do not deduct any taxes, federal subscriber line charges, interstate long distance access charges, or amounts paid for nonregulated services such as voice mail, inside wire maintenance, or equipment purchases/rentals.* **DEDUCTIONS MUST BE INTRASTATE ONLY AND MUST BE VERIFIABLE.**

3. **FAILURE TO FILE BY DUE DATE:** Failure to file a return by the established due date will result in a penalty being added to the amount of fee due, 5% for each 30 days or fraction thereof, not to exceed a total penalty of 25% (Line 6). In addition, interest shall be added in the amount of 1% for each 30 days or fraction thereof, not to exceed a total of 12% per year (Line 7). A Regulatory Assessment Fee Return must be completed, signed, and filed even if there are no revenues to report or if the minimum amount is due.

When a company fails to timely file a Regulatory Assessment Fee Return, the Commission has the authority to order the company to pay a penalty and/or cancel the company's certificate. The company will have an opportunity to respond to any proposed Commission action.

4. **EXTENSION:** A request for an extension of time up to 30 days may be made by filing the enclosed *Request for Extension to File Regulatory Assessment Fee Return* form (PSC/ADM-124), two weeks prior to the filing date. When an extension is granted, a charge shall be added to the amount due:

0.75% of the fee to be remitted for an extension of 15 days or less, or
1.5% of the fee for an extension of 16 to 30 days.

In lieu of paying the charges outlined above, a company may file a return and remit payment based upon estimated gross operating revenues. If such return is filed by the normal due date, the company shall be granted a 30-day extension period in which to file and remit the actual fee due without paying the above charges, provided the estimated fee payment remitted is at least 90% of the actual fee due for the period. An automatic 30-day extension to file an actual return may be obtained by checking the "Estimated Return" space in the top left-hand corner on the reverse side.

5. **FEE ADJUSTMENTS:** You will be notified as to the amount and reason for any adjustment. Penalty and interest charges may be applicable to additional amounts owed the Commission by reason of the adjustment. The company may file a written request for a refund of any overpayments. The request should be directed to Fiscal Services at the below-referenced address.
6. **MAILING INSTRUCTIONS:** Please complete this form, make a copy for your records, and return the original in the enclosed preaddressed envelope. Use of this envelope should assure a more accurate and expeditious recording of your payment. **Make your check payable to the Florida Public Service Commission.** If you are unable to use the envelope, please address your remittance as follows:

Florida Public Service Commission 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850 ATTENTION: Fiscal Services
--

7. **ADDITIONAL ASSISTANCE:** If you need additional information or assistance in preparing your Regulatory Assessment Fee Return, please contact the Division of Auditing and Financial Analysis at (850) 413-6480.

For assistance with Item 9, please contact the Division of Communications at (850) 413-6502.

Both divisions may be contacted at the above-referenced address, directing correspondence to the attention of the division.

Pay Telephone Service Provider Regulatory Assessment Fee Return

STATUS:

- Actual Return
- Estimated Return
- Amended Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TG526
 Wayne Wyckoff
 4608 8th Avenue E
 Bradenton, FL 34208-5832

PERIOD COVERED:
 01/01/00 TO 12/31/00

FOR PSC USE ONLY

Check# _____

\$ _____ 0603002
 _____ 003001

\$ _____ P
 _____ 0603002
 _____ 004011

\$ _____ I

Postmark Date _____

Initials of Preparer _____

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Minimum Regulatory Assessment Fee (RAF) Payment

If the company owes the minimum amount due for the 1999 RAF, please pay the following:

Postmark Date	RAF Fee	Penalty	Interest	Total Due
02/00	\$50.00	\$ 2.50	\$.50	\$53.00
03/00	\$50.00	\$ 5.00	\$1.00	\$56.00
04/00	\$50.00	\$ 7.50	\$1.50	\$59.00
05/00	\$50.00	\$10.00	\$2.00	\$62.00
06/00	\$50.00	\$12.50	\$2.50	\$65.00
07/00	\$50.00	\$12.50	\$3.00	\$65.50
08/00	\$50.00	\$12.50	\$3.50	\$66.00
09/00	\$50.00	\$12.50	\$4.00	\$66.50
10/00	\$50.00	\$12.50	\$4.50	\$67.00
11/00	\$50.00	\$12.50	\$5.00	\$67.50
12/00	\$50.00	\$12.50	\$5.50	\$68.00
01/01	\$50.00	\$12.50	\$6.00	\$68.50

25-24.514 Cancellation of a Certificate.

- (1) The Commission may cancel a company's certificate for any of the following reasons:
- (a) Violation of the terms and conditions under which the authority was originally granted;
 - (b) Violation of Commission rules or orders;
 - (c) Violation of Florida Statutes; or,
 - (d) Failure to provide service for a period of six (6) months.

(2) If a certificated company desires to cancel its certificate, it shall request cancellation from the Commission in writing and shall provide the following with its request.

- (a) Statement of intent and date to pay Regulatory Assessment Fee.
- (b) Statement of why the certificate is proposed to be cancelled.

(3) Cancellation of a certificate shall be ordered subject to the holder providing the information required by subsection (2).

Specific Authority 350.127(2) FS.

Law Implemented 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345 FS.

History--New 1-5-87.

State of Florida



Public Service Commission

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

DATE: April 21, 2000
TO: Jackie Gilchrist, Division of Communications
FROM: Nonnye Grant, Division of Records and Reporting *nlj*
RE: Responses to "Update Letters" - Requesting Cancellation

Recently mailed out my request for "updated information" from all the Companies/Utilities under the FPSC jurisdiction. The following company responded with a letter attached requesting that their certificate be canceled:

1. Wayne Wyckoff - TG526

Forwarding copy of my "updated information" for your information and further handling. Until a docket is opened requesting cancellation and an order issued canceling their certificate, they will remain listed in MCD an "active" company.

Thanking you in advance.

/nbg
Attachments (2)

COMMUNICATIONS SECTION
APR 21 2000 10:10 AM
2000 APR 21 10:10 AM

Wayne Wyckoff

Company Code: TG526

Certificate No(s): 6083

Physical Location: 4610 State Road 64 East Bradenton, FL 34208-9012	ENTER CORRECTIONS BELOW: 4608 8TH AVE E BRADENTON, FL. 34208 - 5832
Mailing Address: 4610 State Road 64 East Bradenton, FL 34208-9012	4608 8TH AVE E BRADENTON FL 34208 - 5832
Liaison Officer(s): 1. Wayne Wyckoff, Title, (941) 747-9329 2. Name, Title, Phone number	941-744-0296
Fax No(s): (941) 747-9329, Fax 2 E-mail address: gozack@ste.net Web address: Federal Employee ID No.:	gozack@ste.net

IMPORTANT NOTE:

The following section is applicable ONLY to companies with d/b/a as part of their official company name.

All official correspondence is addressed to the "Mailing Name" of regulated companies. The "Mailing Name" is the last d/b/a of the company's official name. Our records reflect the mailing name shown below for your company. If you prefer to receive official correspondence in another mailing name, please make the change in the space provided. The name can be no longer than 58 characters (including spaces) and **MUST** be part of the official company name.

*No Reg to Cancel
Mailing Name*

MAILING NAME:

Wayne Wyckoff

COMPLETED BY: WJ Wyckoff

DATE: 3-30-00

TG526
Wayne Wyckoff
4608 8th Avenue East
Bradenton, Florida
34208 - 5832

RECEIVED
FLORIDA PUBLIC
SERVICE COMMISSION
00 APR -4 AM 9:38
MAIL ROOM

March 30, 2000

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

This letter is to request cancellation of my certificate, effective immediately. The request comes because of closure of my business and removal of all public pay phone interests. All active telephones were disconnected and returned to the vendor, VCI 16371 N.W. 57th Avenue, Miami Lakes Florida, 33014.

Please contact me at (941) 744-0296 or 4608 8th Avenue East, Bradenton, Florida 34208, to advise me of any fees due, so that I may pay them.

Thank you.

Sincerely,


Wayne Wyckoff

RECEIVED-FPSC
00 APR 21 AM 9:55
RECORDS AND
REPORTING

6083
5/21/99

00 APR -4 AM 10:28
FLORIDA PUBLIC SERVICE COMMISSION
DIV. OF ADMINISTRATION
CITIZEN SERVICES

RAF ACCOUNT

Printed on 08/14/2000 at 12:54:00 by PJI

Wayne Wyckoff (TG526)

Period Covered: 01/01/1999-12/31/1999	Actual Return: Yes	Operating Revenue:	\$0.00
Service: PAT	Received RAF Form: No	Interstate Revenue:	\$0.00
Due Date: 01/31/2000	Payment Plan: No	Net RAF Due:	\$0.00
Postmark Date: / /	Extension: No	Refund Issued:	\$0.00
Satisfied: No	RAF Rate:	Fine Paid:	\$0.00
DESCRIPTION	AMOUNT DUE	AMOUNT PAID	AMOUNT OWED
RAF	\$0.00	\$0.00	\$0.00
Penalty	\$0.00	\$0.00	\$0.00
Interest	\$0.00	\$0.00	\$0.00
Extension Fee	\$0.00	\$0.00	\$0.00
Additional Payment	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00