

**REQUEST TO ESTABLISH DOCKET**

(Please Type)

**ORIGINAL**

<b>Date</b>	June 26, 2002	<b>Docket No.</b>	020589-7A
<b>1. Division Name/Staff Name:</b>		Division of Competitive Markets & Enforcement/Isler	
<b>2. OPR: Division of Competitive Markets &amp; Enforcement/Isler</b>			
<b>3. OCR: Office of the General Counsel</b>			
<b>4. Suggested Docket Title: Cancellation by Florida Public Service Commission of ALEC Certificate No. 7490 issued to Telergy Network Services, Inc. for violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.</b>			
<b>5. Suggested Docket Mailing List (attach separate sheet if necessary)</b>			
A. Provide NAMES OR ACRONYMS ONLY if a regulated company.			
B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)			
1. Parties and their representatives (if any):			
2. Interested persons and their representatives (if any):			
6. Check one:			
<input checked="" type="checkbox"/> <b>Documentation is attached.</b>			
<input type="checkbox"/> <b>Documentation will be provided with recommendation.</b>			
PSC\CCA010-C (Rev 10/01)			

DOCUMENT NUMBER-DATE  
06576 JUN 26 8  
FPSC-COMMISSION CLERK

STATE OF FLORIDA

COMMISSIONERS:  
LILA A. JABER, CHAIRMAN  
J. TERRY DEASON  
BRAULIO L. BAEZ  
MICHAEL A. PALECKI  
RUDOLPH "RUDY" BRADLEY



DIVISION OF COMPETITIVE MARKETS &  
ENFORCEMENT  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

## Public Service Commission

May 3, 2002

Ms. Theresa Atkins, Asst. General Counsel  
Telergy Network Services, Inc. (TX450)  
1 Telergy Parkway  
East Syracuse, NY 13057-1399

Dear Ms. Atkins:

The Regulatory Assessment Fee (RAF) is due by January 30<sup>th</sup> of each year for the preceding calendar year. For certificate holders, the RAF is owed even if a telecommunications company may not have started operations or had any revenues. If payment is made after the due date, then statutory penalty and interest charges are applicable.

Our records show the 2001 RAF return notice was mailed December 12, 2001, and a delinquent notice was mailed February 20, 2002. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2001 RAF return form is attached.

If full payment, including penalty and interest charges, along with the RAF return form, are not received by May 24, 2002, it is my intention to establish a docket and recommend that the Commission fine your company \$500 or cancel your certificate. Please note that once a docket has been established, **just paying the delinquent RAF amount will not prevent your certificate from being cancelled.**

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should pay the past due amount in full, complete the 2001 RAF return form, either pay the 2002 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.820, Florida Administrative Code, copy attached. Any unpaid RAFs, including penalty and interest charges, are turned over to the Comptroller's Office for collection if the Commission cancels a company's certificate on its own motion (involuntary cancellations).

If you have any questions, please contact me at (850) 413-6502-voice, (850) 413-6503-fax, at the address below, or via internet e-mail at [pisler@psc.state.fl.us](mailto:pisler@psc.state.fl.us).

Ms. Theresa Atkins, Asst. General Counsel  
Page 2  
May 3, 2002

Sincerely,

A handwritten signature in cursive script that reads "Paula J. Isler".

Paula J. Isler, Research Assistant  
Bureau of Service Quality

Enclosures

# Alternative Local Exchange Company Regulatory Assessment Fee Return

**STATUS:**

- Actual Return
- Estimated Return
- Amended Return

**PERIOD COVERED:**  
01/01/2001 TO 12/31/2001

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

TX450-01-0-R  
 Telergy Network Services, Inc.  
 1 Telergy Parkway  
 East Syracuse, NY 13057-1399  
*C.C. P. T. Esler*

Please Complete Below If Official Mailing Address Has Changed

**FOR PSC USE ONLY**

Check# \_\_\_\_\_

\$ \_\_\_\_\_ 0603006  
 \_\_\_\_\_ 003001

\$ \_\_\_\_\_ P  
 \_\_\_\_\_ 0603006  
 \_\_\_\_\_ 004011

\$ \_\_\_\_\_ I

Postmark Date \_\_\_\_\_

Initials of Preparer \_\_\_\_\_

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

LINE NO.	ACCOUNT CLASSIFICATION	FLORIDA GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ _____	\$ _____
2.	Long Distance Services (IntraLATA only)**	_____	_____
3.	Access Services	_____	_____
4.	Private Line Services	_____	_____
5.	Leased Facilities & Circuits Services	_____	_____
6.	Miscellaneous Services	_____	_____
7.	<b>TOTAL REVENUES</b>		\$ _____
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		_____
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		_____
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		_____
11.	Penalty for Late Payment (see "3. Failure to File by Due Date" on back)	_____	
12.	Interest for Late Payment (see "3. Failure to File by Due Date" on back)	_____	
13.	<b>TOTAL AMOUNT DUE</b>		\$ _____

\* These amounts must be intrastate only and must be verifiable.  
 \*\* Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

**AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50**

Facilities-Based Provider

**CURRENT COMPANY STATUS**

Reseller  
 Other: \_\_\_\_\_

**BILLING INFORMATION**

Complete below if billing agent if other than yourself.

\_\_\_\_\_  
 (Name) (Address: City/State/Zip) (Telephone)

**COMPANY INFORMATION**

Do you lease telecommunications facilities?  YES  NO  
 If YES, who do you lease these facilities from? Name: \_\_\_\_\_

Address: \_\_\_\_\_

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/her 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. \_\_\_\_\_

## **25-24.820 Revocation of a Certificate.**

(1) The Commission may on its own motion, after notice and opportunity for hearing, revoke a company's certificate for any of the following reasons:

- (a) Violation of a term or condition under which the authority was originally granted;
- (b) Violation of Commission rule or order;
- (c) Violation of Florida Statute; or
- (d) Violation of a price list standard.

(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. Cancellation of a certificate shall be ordered subject to the holder providing the required information.

- (a) A statement of intent and date certain to pay regulatory assessment fee.
- (b) A statement of why the certificate is proposed to be canceled.
- (c) A statement as to how customer deposits and final bills will be handled.
- (d) Proof of individual customer notice regarding discontinuance of service.

Specific Authority 350.127(2) FS.  
Law Implemented 364.335, 364.345 FS.  
History--New 12-27-95.

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to

TX450 Telergy Network Services, Inc  
1 Telergy Parkway  
East Syracuse, New York 13057-1399

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) *J. Carrillo* B. Date of Delivery *2/26*  
C. Signature *[Signature]*  Agent  
 Addressee  
D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number *7001 2510 0007 6217 3534*  
(Transfer from service label)

*FCS*

## MCD Company Information for TX450

Printed on 06/25/2002 at 11:43:38 by PJI

Company Code: TX450  
Company Name: Telergy Network Services, Inc.  
Certificate No(s): 7490  
Status: Active  
Regulation Date: 07/18/2000  
Bankruptcy: No  
Company Liaison #1: Theresa Atkins  
Title: Assistant General Counsel  
Mailing Address: 1 Telergy Parkway

Physical Location: East Syracuse, NY 13057-1399  
1 Telergy Parkway

Phone: East Syracuse, NY 13057-1399  
(315) 362-2882  
Fax: (315) 362-2635

### Related Dockets:

000473-TX Application for certificate to provide alternative local exchange telecommunications service by Telergy Network Services, Inc.

COMPANY IDENTIFICATION

Printed on 04/26/2002 at 16:30:02 by PJI

Complete Name: Telergy Network Services, Inc.

Mailing Name: Telergy Network Services, Inc.

Company Code: TX450 FEID Number: 16-1554071

RAF ACCOUNT FOR THE PERIOD 01/01/2001 THROUGH 12/31/2001

Reg. Date: 07/18/2000 Inactive Date:  
 Service: ALX - Alternative Local Exchange  
 Received: No RAF Form  
 Status: Pending  
 Amended: No Extension: No  
 Frozen: No Comments: No  
 Payment Count: 0 Payments Made to Date  
 Operating Rev: \$0.00 Interstate Rev: \$0.00  
 RAF Rate: Net RAF Due: \$0.00

Assessment	Due	Paid	Owe
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
Total	\$0.00	\$0.00	\$0.00

Last modification was made on Thursday, December 6, 2001 at 2:40 PM by Jackie Knight

Period covered: 01/01/2001 through 12/31/2001 RAF rate:  
 Operating rev: \$0.00 Gross intrastate rev: \$0.00  
 Documents: Delinquent letter mailed on 02/20/2002  
 RAF form mailed on 12/06/2001