

**REQUEST TO ESTABLISH DOCKET**

**ORIGINAL**

(Please Type)

<b>Date</b>	July 17, 2002	<b>Docket No.</b>	020748-TI
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<b>1. Division Name/Staff Name:</b>	Division of Competitive Markets & Enforcement/Isler
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<b>2. OPR:</b> Division of Competitive Markets & Enforcement/Isler
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<b>3. OCR:</b> Office of the General Counsel
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<b>4. Suggested Docket Title:</b> Cancellation by Florida Public Service Commission of IXC Certificate No. 7781 issued to Debit One Communications, Inc. for violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies and 25-24.480, F.A.C., Records & Report; Rules Incorporated.
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<b>5. Suggested Docket Mailing List (attach separate sheet if necessary)</b>
<b>A. Provide NAMES OR ACRONYMS ONLY if a regulated company.</b>
<b>B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)</b>
<b>1. Parties and their representatives (if any):</b>


<b>2. Interested persons and their representatives (if any):</b>

<b>6. Check one:</b>
<input checked="" type="checkbox"/> <b>Documentation is attached.</b>
<input type="checkbox"/> <b>Documentation will be provided with recommendation.</b>
<b>PSC\CCA010-C (Rev 10/01)</b>

DOCUMENT NUMBER-DATE  
07431 JUL 17 2002  
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 23, 2002

Ms. Cheryl Giles, Controller  
Debit One Communications, Inc. (TJ494)  
1428 Brickell Avenue, Suite 100  
Miami, FL 33131-3409

Dear Ms. Giles:

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 enclosed.

If full payment, including penalty and interest charges, along with the RAF return form, are not received by June 13, 2002, it is my intention to establish a docket and recommend that the Commission fine your company \$1,000 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.**

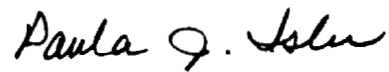
In addition to nonpayment of the 2001 RAF, the Commission has attempted to contact your company without success. Commission rules provide that a telecommunications company must update its address, telephone numbers, and liaison within 10 days of a change. The USPS returned mail to us addressed to your company. This information needs updating with us by June 13<sup>th</sup>.

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 25-24.474, 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).

Ms. Cheryl Giles, Controller  
Page 2  
May 23, 2002

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).

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 stylized "I".

Paula J. Isler, Research Assistant  
Bureau of Service Quality

Enclosures

# Interexchange Company Regulatory Assessment Fee Return

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

FOR PSC USE ONLY	
Check# _____	
\$ _____	0603001 003001
\$ _____	P 0603001 004011
\$ _____	I
Postmark Date _____	
Initials of Preparer _____	

STATUS:

Actual Return

Estimated Return

Amended Return

TJ494-01-0-R

Debit One Communications, Inc.

1428 Brickell Avenue, Suite 100

Miami, FL 33131-3409

cc: P. Isler

PERIOD COVERED:  
04/17/2001 TO 12/31/2001

Please Complete Below If Official Mailing Address Has Changed

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

\* These amounts must be intrastate only and must be verifiable.

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

CURRENT COMPANY STATUS			
<input type="checkbox"/> Facilities-Based Carrier	<input type="checkbox"/> Reseller	<input type="checkbox"/> Call Aggregator	
<input type="checkbox"/> Alternate-Operator Service	<input type="checkbox"/> Rebiller	<input type="checkbox"/> Other: _____	

BILLING INFORMATION		
Complete below if billing agent if other than yourself.		
(Name)	(Address: City/State/Zip)	(Telephone)
What is the total amount of customer deposits collected? Amount: \$ _____ for 19 _____		What is the total amount of bond held (if applicable)? Amount: \$ _____ Expires: _____

COMPANY INFORMATION	
Do you lease telecommunications' facilities? <input type="checkbox"/> YES <input type="checkbox"/> 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)
<b>(Preparer of Form - Please Print Name)</b>	Telephone Number ( ) _____	Fax Number ( ) _____
	F.E.I. No. _____	

## **25-24.474 Cancellation of a Certificate.**

(1) The Commission may on its own motion 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 rule or order; or
- (c) Violation of Florida Statutes.

(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.
- (c) A statement on treatment of customer deposits and final bills.
- (d) Proof of individual customer notice regarding discontinuance of service.

(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), 364.285, 364.337, 364.345 FS.

History--New 2-23-87, Amended 3-13-96.

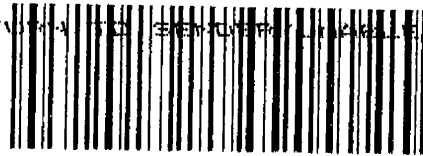
State of Florida  
**Public Service Commission**

2540 Shumard Oak Boulevard  
Tallahassee, Florida 32399-0850

NO SUCH NAME  
RETURN TO SENDER

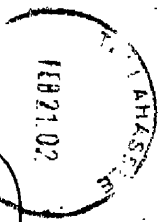
**CERTIFIED MAIL**

RETURN TO SENDER UNABLE TO FORWARD

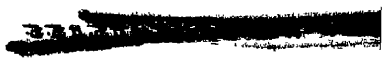
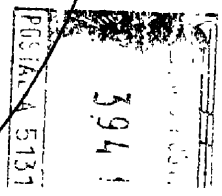


7001 2510 0007 4216 2855

DIVISION OF  
COMPETITIVE SERVICES  
02 MAR 20 AM 11:09



NO LONGER  
IN BUSINESS  
MBY



T 5 494

STATE OF FLORIDA

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



OFFICE OF GENERAL COUNSEL  
HAROLD A. MCLEAN  
(850) 413-6199

# Public Service Commission

February 20, 2002

TJ494-01-0-D  
Debit One Communications, Inc.  
1428 Brickell Avenue, Suite 100  
Miami, FL 33131-3409

Dear Certificate Holder:

The Division of the Commission's Clerk and Administrative Services has forwarded your account to our office to address the nonpayment of the Regulatory Assessment Fees (RAFs) required by Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code, for the year 2001, which was due January 30, 2002. The RAFs return form was mailed to you on **December 15, 2001**, and to date, Commission records reflect that payment has not been received.

According to Florida Law, you are required to add interest charges at 12% per annum, and a 5% penalty for each 30-day period or fraction thereof, beyond the due date, up to a maximum of 25% in addition to the delinquent amount due. In addition, pursuant to Section 364.285, Florida Statutes, the Commission is authorized to impose upon any entity subject to its jurisdiction a penalty of not more than \$25,000 for each offense, if such entity is found to have refused to comply with or to have willfully violated any lawful rule or order of the Commission, or any provision of Chapter 364.

Utilities are charged with knowledge of our rules and statutes. Moreover, it is general Commission practice that all utilities that apply for **Interexchange Telephone** certificate receive a copy of all applicable rules. Further, in accordance with Section 364.335, Florida Statutes, as part of the application process, utilities provide an affidavit indicating that they have read and understood the applicable rules.

If you wish to request another form, please contact Jackie Knight at the number below. The payment should be identified with the company code and the company's name. Failure to provide payment within 15 days of this notice will result in the establishment of a docket to address your failure to return the RAFs form and pay RAFs in accordance with Section 364.336, Florida Statutes, and Rule 25-4.0161, Florida Administrative Code. As specified above, pursuant to Section 364.285, Florida Statutes, the Commission may impose a fine or cancel your telecommunications certificate. Therefore, it is important that you address this matter now.

If you have paid your fees, please provide us with your check number and the date that it was paid.

Should you have any questions concerning this letter please contact **Jackie Knight** at (850) 413-6267 or via Internet e-mail at [jknight@psc.state.fl.us](mailto:jknight@psc.state.fl.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Harold McLean".

**Harold McLean**  
General Counsel

KMP

Enclosure

cc: Jackie Knight, Bureau of Administrative Services/Fiscal Services Section

## MCD Company Information for TJ494

Printed on 07/12/2002 at 09:44:56 by PJI

Company Code: TJ494  
Complete Name: Debit One Communications, Inc.  
Mailing Name: Debit One Communications, Inc.  
Certificate No(s): 7781  
Status: Active  
Regulation Date: 04/17/2001  
Bankruptcy: No  
Company Liaison #1: Cheryl Giles  
Title: Controller  
Mailing Address: 1428 Brickell Avenue, Suite 100  
  
Physical Location: Miami, FL 33131-3409  
1428 Brickell Avenue, Suite 100  
  
Phone: Miami, FL 33131-3409  
(305) 377-3534  
Fax: (305) 377-9136  
  
Related Dockets:  
001781-TI Application for certificate to provide interexchange  
telecommunications service by Debit One Communications, Inc.



COMPANY IDENTIFICATION

Printed on 05/21/2002 at 15:40:15 by PJI

Complete Name: Debit One Communications, Inc.

Mailing Name: Debit One Communications, Inc.

Company Code: TJ494 FEID Number: 65-0940037

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

Reg. Date: 04/17/2001 Inactive Date:  
 Service: IXC - Interexchange Telephone  
 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 2:57 PM by Jackie Knight

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