

REQUEST TO ESTABLISH DOCKET
(Please Type)

ORIGINAL

Date	July 17, 2002	Docket No.	020755-TI
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1. Division Name/Staff Name:	Division of Competitive Markets & Enforcement/Isler
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2. OPR: Division of Competitive Markets & Enforcement/Isler
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3. OCR: Office of the General Counsel
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4. Suggested Docket Title: Cancellation by Florida Public Service Commission of IXC Certificate No. 7926 issued to NTERA, Inc. for violation of Rule 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies.
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5. Suggested Docket Mailing List (attach separate sheet if necessary) 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):
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2. Interested persons and their representatives (if any):

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

DOCUMENT NUMBER - DATE
07438 JUL 17 02
FPSC-COMMISSION OF EDU

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

Mr. Korhan Aydin, Operations
NTERA, Inc. (TJ543)
1020 N.W. 163rd Drive
Miami, FL 33169-5818

Dear Mr. Aydin:

The Regulatory Assessment Fee (RAF) is due by January 30th 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 \$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 25-24.474, Florida Administrative Code, copy enclosed. 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).

Mr. Korhan Aydin, Operations
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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.

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

STATUS:

- Actual Return
- Estimated Return
- Amended Return

PERIOD COVERED:
10/19/2001 TO 12/31/2001

Florida Public Service Commission

(See Filing Instructions on Back of Form)

TJ543-01-0-R
 NTERA, Inc.
 1020 N. W. 163rd Drive
 Miami, FL 33169-5818

cc: P. Isler

Please Complete Below If Official Mailing Address Has Changed

FOR PSC USE ONLY

Check# _____

\$ _____ 0603001
003001

\$ _____ P
0603001
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.	Long Distance Services	\$ _____	\$ _____
2.	Access Services	_____	_____
3.	Private Line Services	_____	_____
4.	Leased Facilities & Circuits Services	_____	_____
5.	Miscellaneous Services	_____	_____
6.	TOTAL Telephone Services	\$ _____	\$ _____
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	(_____)	(_____)
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation	_____	_____
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.	TOTAL AMOUNT DUE	_____	\$ _____

* 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

- Facilities-Based Carrier Reseller Call Aggregator
 Alternate-Operator Service Rebiller 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? What is the total amount of bond held (if applicable)?
 Amount: \$ _____ for 19 _____ Amount: \$ _____ Expires: _____

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. _____

25-24.474 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.

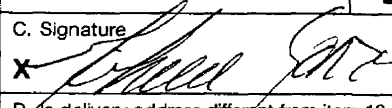
- (a) Statement of intent and date to pay Regulatory Assessment Fee.
- (b) Statement of why the certificate is proposed to be cancelled.
- (c) A statement on treatment of customer deposits and final bills.
- (d) Proof of individual customer notice regarding discontinuance of service.

(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.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ 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. 	A. Received by (Please Print Clearly)	B. Date of Delivery 3/25
<p>1. Article Addressed to:</p> <p>TJ543 NTERA, Inc. 1020 N. W. 163rd Drive Miami, Florida 33169-5818</p>	C. Signature 	
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes " YES, enter delivery address below: <input type="checkbox"/> No	
<p>2. Article Number (Transfer from service label)</p>	3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	<p>7001 2510 0007 4216 2251</p> <p style="text-align: right;"><i>RSC</i></p>	

MCD Company Information for TJ543

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

Company Code: TJ543
Complete Name: NTERA, Inc.
Mailing Name: NTERA, Inc.
Certificate No(s): 7926
Status: Active
Regulation Date: 10/19/2001
Bankruptcy: No
Company Liaison #1: Korhan Aydin
Title: Operations
Mailing Address: 1020 N. W. 163rd Drive

Physical Location: Miami, FL 33169-5818
1020 N. W. 163rd Drive

Phone: Miami, FL 33169-5818
(305) 914-3452
Fax: (305) 625-8167

Related Dockets:

010752-TI Application for certificate to provide interexchange telecommunications service by NTERA, Inc.

