ORIGINAL

REQUEST TO ESTABLISH DOCKET (Please Type)						
Date	October 22, 2002	Docket No. 02/073-TC				
1. Division Name/Staff Name:		Division of Competitive Markets & Enforcement/Isler				
2. OPR:	Division of Competitive Markets & Enforcemen	t/Isler				
3. OCR:	3. OCR: Office of the General Counsel					
4. Suggested Docket Title: Cancellation by Florida Public Service Commission of PATS Certificate No. 7977						
issued to	Live Wire Systems, Inc. for violation of Rules 2	5-4.0161, F.A.C., Regulatory Assessment Fees;				
Telecom	munications Companies and 25-24.520, F.A.C.,	Reporting Requirements.				
5. Sugg	ested Docket Mailing List (attach separate shee	t if necessary)				
A. Provide NAMES OR ACRONYMS ONLY if a regulated company.						
В. 1	B. Provide COMPLETE NAME AND ADDRESS for all others. (Match representatives to companies.)					
] 1	1. Parties and their representatives (if any):					
2. Interested persons and their representatives (if any):						
6. Check one: XX Documentation is attached.						
Documentation will be provided with recommendation.						
PSC\CCA010-C (Rev 10/01)						

DOCUMENT NUMBER 2111

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

Hublic Service Commission

August 22, 2002

Mr. James Davis, President Live Wire Systems, Inc. (TG853) 2787 East Oakland Park Blvd., #209 Fort Lauderdale, FL 33306-1631

Dear Mr. Davis:

As part of my job duties, I establish dockets to collect payment of the Regulatory Assessment Fees owed by certificated telecommunication companies. In reconciling the active certificates with the certificate holders that have not paid the Regulatory Assessment Fee, I found that payment of the 2001 Regulatory Assessment Fee has not been received from Live Wire Systems, Inc.

According to our records, the company's certificate became active December 28, 2001. As information, if a certificate is active for any one day during a calendar year, the Regulatory Assessment Fee is applicable for that year. Enclosed are pages 8-10 of the company's application, which states that a minimum \$50 Regulatory Assessment Fee is due each year and a copy of the Commission's Order granting the certificate, which states on page 2 that the Regulatory Assessment Fee is due each year.

Rule 25-4.0161(7)(d), Florida Administrative Code, provides that failure to receive a form by a telecommunications company shall not excuse it from its obligation to pay the fee timely. However, I have checked our records and found that the Commission did not mail your company a form. Therefore, before establishing a docket to fine Live Wire Systems, Inc. for nonpayment of the fee, I am enclosing the 2001 Regulatory Assessment Fee return form to allow the company an opportunity to pay the Regulatory Assessment Fee.

If payment is postmarked by August 28, 2002, the total due is \$66.00 (\$50.00 fee, \$12.50 penalty, and \$3.50 interest). If payment is postmarked between August 29 and September 27, 2002, the interest increases to \$4.00, or a total due of \$66.50.

Please review this information and respond by September 12, 2002. If payment is not received by September 12th, I will have no choice but to establish the enforcement docket.

PSC Website: http://www.floridapsc.com

Mr. James Davis, President Page 2 August 22, 2002

In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-voice, (850) 413-6503-fax, by internet e-mail at pisler@psc.state.fl.us, or at the address below.

Sincerely,

Paula J. Isler, Research Assistant

Bureau of Service Quality

Enclosures

APPLICANT FEE/TAX STATEMENT

- 1. REGULATORY ASSESSMENT FEE: I understand that all telephone companies must pay a regulatory assessment fee in the amount of <u>0.15 of one percent</u> of the gross operating revenue derived from intrastate business. Regardless of the gross operating revenue of a company, a minimum annual assessment fee of \$50 is required.
- 2. GROSS RECEIPTS TAX: I understand that all telephone companies must pay a gross receipts tax of two and one-half percent on all intra- and interstate business.
- 3. SALES TAX: I understand the a <u>seven percent</u> sales tax must be paid on intra- and interstate revenues.
- 4. APPLICATION FEE: I understand that a non-refundable application fee of \$100.00 must be submitted with the application.

UTILITY OFFICIAL:		
JAMES J DAVIS		
Print Name	Signature	
Peldet Title	9/17/01	
Title	Date /	
954.729-2055	954-229-2630	
Telephone No.	Fax No.	
Address: 1787 FOAKland	Park Blut \$209	
FT Lorderdole, FL 33306		

ACKNOWLEDGMENT

By my signature below, I, the undersigned owner/officer, have read the foregoing and declare that, to the best of my knowledge and belief, the information is true and correct. I attest that I have the authority to sign on behalf of my company and agree to comply, now and in the future, with all applicable Commission rules and orders.

I will comply with all current and future Commission requirements regarding pay telephone service. I understand that I am required to pay a regulatory assessment fee (minimum of \$50.00 per calendar year), file an annual pay telephone service report, pay applicable sales tax, and pay gross receipts tax. Furthermore, I agree to keep the Commission advised of any changes in the names and addresses listed in the application within 10 days of the change.

Further, I am aware that, pursuant to Chapter 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, punishable as provided in s. 775.082 and s. 775.083."

UTILITY	OFFICIAL:			
James			1.0	
Print Name			ature	
In le	<i>_</i>		9/16/01	
Title		Date	•	
954-225	-2055		954.227-2630	t
Telephone I		Fax	No.	
Address:	1975 F. Su	urie bld		
	# 776			
	FT herderdale	FL J	75304	
		,		

APPLICANT ACKNOWLEDGMENT

Applicant:	fve (s.ke s /5/0	in 1, Ive		
		nderstanding of the Florida Public Service nts relating to my provision of Pay Telephone		
James	8 Davi 3	\ l Q		
Print Name		Signature		
		9/12/11		
Title		Date		
55	4-219-2055	954.729-2630		
Telephone N		Fax No.		
Address:	2787 FORK/A	I Post De 1		
	2787 FORKIA	Fi 33306		

THIS ACKNOWLEDGMENT FORM MUST BE COMPLETED AND RETURNED AS PART OF THE APPLICATION BEFORE THE CERTIFICATION PROCESS BEGINS. FAILURE TO DO SO WILL RESULT IN A DELAY OF THE CERTIFICATE BEING ISSUED.