

REQUEST TO ESTABLISH DOCKET

(Please Type)

Date:	8/19/2005	Docket No.:	050555-TC
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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
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3. OCR:	Office Of The General Counsel
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4. Suggested Docket Title:	Request for cancellation of PATS Certificate No. 8395 by Feda Hamdan, effective August 17, 2005.
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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):

2. Interested persons and their representatives (if any):

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

DOCUMENT NUMBER-DATE

08083 AUG 19 2005
G:\est.doc

Pay Telephone Service Provider Regulatory Assessment Fee Return

Total \$117.00

STATUS:

- Actual Return
- Estimated Return
- Amended Return

Florida Public Service Commission
(See Filing Instructions on Back of Form)

TG964-04-0-R
 Feda Hamdan
 60 Citrus Ridge Court
 Haines City, FL 33844-5428

(Isler)

584 AUG 18 2005

FOR PSC USE ONLY	
Check#	372
\$	50.00 06-03-001 003001
\$	12.50 P 06-03-001 004011
\$	7.50 I
Postmark Date	8-15-05
Initials of Preparer	PT

PERIOD COVERED:
01/01/2004 TO 12/31/2004

Please Complete Below If Official Mailing Address Has Changed

Feda Hamdan
(Name of Company)

60 Citrus Ridge CT
(Address)

Haines City 33844
(City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Operating Revenue (Florida)	\$ 1700
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)	<u>117.00</u>
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	\$ <u>117.00</u>

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 _____

This amount paid is for the 2004 and 2005 year please close n account

* 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.

Feda Hamdan
(Signature of Company Official)

Owner (Title) 8-17-05 (Date)

Telephone Number 803 242-2277 Fax Number ()

803 605-2108

(Preparer of Form - Please Print Name)

F.E.I. No. _____

COMMISSIONERS:
BRAULIO L. BAEZ, CHAIRMAN
J. TERRY DEASON
RUDOLPH "RUDY" BRADLEY
LISA POLAK EDGAR

STATE OF FLORIDA



DIVISION OF COMPETITIVE MARKETS &
ENFORCEMENT
BETH W. SALAK
DIRECTOR
(850) 413-6600

Public Service Commission

July 29, 2005

Ms. Feda Hamdan (TG964)
60 Citrus Ridge Court
Haines City, FL 33844-5428

Dear Ms. Hamdan:

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. Since payment has not been made, statutory penalty and interest charges are now applicable. If the company owes the minimum, the amount due is **\$66.00** (\$50.00 fee, \$12.50 penalty, and \$3.50 interest).

Our records show that the 2004 RAF return notice was mailed on December 10, 2004, and a delinquent notice was mailed on February 18, 2005. As of this date, our records do not show receipt of the RAF return or payment. A copy of the 2004 RAF return form is enclosed. If full payment, including penalty and interest charges, along with the RAF return form, are not received by August 19, 2005, a docket may be established. Your company may be fined or the certificate cancelled if you do not respond. Please note that once a docket has been established, **just paying the delinquent RAF amount will not prevent the company's certificate from being cancelled.**

If you wish to cancel your certificate voluntarily and leave in good standing with the Commission, your company should write a letter requesting cancellation, pay the past due amount in full, complete the 2004 RAF return form, either pay the 2005 RAF or provide a date certain it will be paid, and comply with the requirements of Rule 25-24.514, Florida Administrative Code, copy enclosed. Any unpaid RAFs, including penalty and interest charges, are turned over to collections. When returning payment and a copy of the completed 2004 Regulatory Assessment Fee return form, please use the enclosed blue envelope, which will insure prompt processing.

If you have any questions, please contact me at (850) 413-6502, by fax at (850) 413-6503, by e-mail at pisler@psc.state.fl.us, or by writing to me at the address below.

Sincerely,

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

Paula J. Isler
Bureau of Service Quality

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

TG964-04-0-R Feda Hamdan 60 Citrus Ridge Court Haines City, FL 33844-5428 (Isler)

FOR PSC USE ONLY	
Check#	
\$ _____	06-03-001 003001
\$ _____ P	06-03-001 004011
\$ _____ I	
Postmark Date _____	
Initials of Preparer _____	

PERIOD COVERED:
01/01/2004 TO 12/31/2004

Please Complete Below If Official Mailing Address Has Changed

(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)	\$ _____
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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

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(Signature of Company Official) (Title) (Date)

Telephone Number () Fax Number ()

(Preparer of Form - Please Print Name)

F.E.I. No. _____

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), F. S.

Law Implemented: 350.113, 350.127(1), 364.03, 364.285, 364.337, 364.345, F.S.

History: New 1/5/87.

1st

MCD Company Information for TG964

Printed on 07/14/2005 at 11:42:39 by PJI

Company Code: TG964
 Complete Name: Feda Hamdan
 Mailing Name: Feda Hamdan
 Certificate No(s): 8395
 Status: Active
 Regulation Date: 11/07/2003
 Bankruptcy: No
 Company Liaison #1: Feda Hamdan
 Title: Owner
 Mailing Address: 60 Citrus Ridge Court

Physical Location: Haines City, FL 33844-5428
 60 Citrus Ridge Court

Phone: Haines City, FL 33844-5428
 (863) 421-4519
 Fax:

Related Dockets:

030778-TC Application for certificate to provide pay telephone service by Feda Hamdan.