

# REQUEST TO ESTABLISH DOCKET

(Please Type)

Date: 6/13/2006 Docket No.: 060448-71

1. Division Name/Staff Name: Division Of Competitive Markets & Enforcement/Isler

2. OPR: Division Of The Commission Clerk And Administrative Services

3. OCR: Office Of The General Counsel

4. Suggested Docket Title: Acknowledgement of cancellation of IXC Registration No. TJ843 and request for cancellation of CLEC Certificate No. 8405 by Sail Telecom, Inc., effective May 22, 2006.

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

05077 JUN 13 06

COMMISSIONERS:  
LISA POLAK EDGAR, CHAIRMAN  
J. TERRY DEASON  
ISILIO ARRIAGA  
MATTHEW M. CARTER II  
KATRINA J. TEW

STATE OF FLORIDA



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

Public Service Commission

June 13, 2006

Mr. Thomas Kowalewski, CEO  
Sail Telecom, Inc. (TJ843 and TX746)  
9065 Barnwell Road  
Alpharetta, GA 30022

Dear Mr. Kowalewski:

The Commission received your letter dated May 17, 2006, requesting cancellation of your CLEC certificate because the company is in the process of being dissolved. Sail Telecom, Inc. also has an IXC registration with us (TJ843). Do you wish to cancel that registration also? As information, there are two types of cancellation, one is voluntary, which is granted if a company leaves in good standing and does not owe any fees. The other is involuntary, which is when a certificate is cancelled on the Commission's own motion for violation of a rule, order, or statute.

The Regulatory Assessment Fee is owed if a certificate is active during any portion of a calendar year. This means the 2006 Regulatory Assessment Fee is applicable. Our IXC cancellation rule provides that a company must pay the current year's fee at the time it requests cancellation. Our CLEC cancellation rule provides that a company must either pay the current year's fee, in this case the 2006 fee, or provide a date certain it will be paid, such as 30 days after the Order is issued.

Therefore, before staff can recommend a voluntary cancellation, I need to know if you want both the IXC registration and CLEC certificate cancelled and the company needs to comply with the cancellation rule. The 2006 Regulatory Assessment Fee return forms are enclosed. Please use the enclosed blue envelope, which will insure prompt processing.

Please respond by June 28, 2006. In the meantime, if you have any questions, just let me know. I can be reached at (850) 413-6502-phone, (850) 413-6503-fax, by internet e-mail at [PIsler@psc.state.fl.us](mailto:PIsler@psc.state.fl.us), or at the address below.

Sincerely,

Handwritten signature of Paula J. Isler in black ink.

Paula J. Isler  
Bureau of Telecommunications Service Quality,  
Certification and Enforcement

Enclosures

# Interexchange Company Regulatory Assessment Fee Return

## Florida Public Service Commission

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

**STATUS:**

- Actual Return  
 Estimated Return  
 Amended Return

(See Filing Instructions on Back of Form)

TJ843-06-0-R  
 Sail Telecom, Inc.  
 9065 Barnwell Road  
 Alpharetta, GA 30022-5360

**PERIOD COVERED:**  
01/01/2006 TO 12/31/2006

Please Complete Below If Official Mailing Address Has Changed

\_\_\_\_\_  
 (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.	<b>TOTAL Telephone Services</b>	\$ _____	\$ _____
7.	<b>LESS: Amounts Paid to Telecommunications Companies<sup>(1)</sup></b>	( _____ )	( _____ )
8.	<b>TOTAL REVENUES</b> For Regulatory Assessment Fee Calculation		\$ _____
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0020)		_____
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.	Extension Payment Fee (see "4. Extension" on back)		_____
13.	<b>TOTAL AMOUNT DUE (\$50 MINIMUM)</b>		\$ _____ <sup>(2)</sup>

(1) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).  
 (2) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

**CURRENT COMPANY STATUS**

- Facilities-Based Carrier       Reseller       Call Aggregator  
 Alternate-Operator Service       Rebiller       Other: \_\_\_\_\_

**BILLING INFORMATION**

Complete below if billing agent is 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 20 \_\_\_\_\_      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)  
 \_\_\_\_\_ Telephone Number ( ) \_\_\_\_\_ Fax Number ( )  
 (Preparer of Form - Please Print Name)

F.E.I. No. \_\_\_\_\_

# Competitive Local Exchange Company Regulatory Assessment Fee Return

## Florida Public Service Commission

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

**STATUS:**

- Actual Return  
 Estimated Return  
 Amended Return

(See Filing Instructions on Back of Form)

TX746-06-0-R  
 Sail Telecom, Inc.  
 9065 Barnwell Road  
 Alpharetta, GA 30022-5360

**PERIOD COVERED:**

01/01/2006 TO 12/31/2006

Please Complete Below If Official Mailing Address Has Changed

\_\_\_\_\_  
 (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) <sup>(1)</sup>	_____	_____
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 <sup>(2)</sup>		_____
9.	<b>NET INTRASTATE OPERATING REVENUE</b> for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		\$ _____
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0020)		_____
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.	Extension Payment Fee (see "4. Extension" on back)		_____
14.	<b>TOTAL AMOUNT DUE (\$50 MINIMUM)</b>		\$ _____ <sup>(3)</sup>

(1) Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.  
 (2) These amounts must be intrastate only and must be verifiable (see "2. Fees" on back).  
 (3) Regardless of the gross operating revenue of a company, a minimum annual regulatory assessment fee of \$50 shall be imposed as provided in Section 364.336, Florida Statutes.

**CURRENT COMPANY STATUS**

- Facilities-Based Provider       Reseller  
 Other: \_\_\_\_\_

**BILLING INFORMATION**

Complete below if billing agent is 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 official duty shall be guilty of a misdemeanor of the second degree.

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

\_\_\_\_\_  
 Telephone Number ( ) Fax Number ( )

(Preparer of Form - Please Print Name)

F.E.I. No. \_\_\_\_\_

## Paula Isler

---

**From:** MAILER-DAEMON@sailnetworks.com  
**Sent:** Monday, June 12, 2006 4:31 PM  
**To:** Paula Isler  
**Subject:** failure notice

Sorry, unable to deliver your message to postmaster@sailnetworks.com for the following reason:

552 Quota violation for postmaster@sailnetworks.com

A copy of the original message below this line:

Return-Path: <PIsler@PSC.STATE.FL.US>  
Received: from mail.psc.state.fl.us ([207.156.28.3])  
by whmx-evening.pas.sa.earthlink.net (EarthLink Mail Service) with ESMTTP id  
1fPT3l5Cq3NZFkO0  
for <tk@sailnetworks.com>; Mon, 12 Jun 2006 13:30:27 -0700 (PDT)  
Received: from psc-exc-2k3.psc.state.fl.us ([207.156.28.134]) by mail.psc.state.fl.us with  
Microsoft SMTPSVC(5.0.2195.6713);  
Mon, 12 Jun 2006 16:29:59 -0400  
Content-class: urn:content-classes:message  
MIME-Version: 1.0  
Content-Type: multipart/mixed;  
boundary="----=\_NextPart\_001\_01C68E5E.FAA62304"  
X-MimeOLE: Produced By Microsoft Exchange V6.5  
Subject: Request for cancellation  
Date: Mon, 12 Jun 2006 16:30:00 -0400  
Message-ID: <69D9105AAF5422478E7FCDBC879F1E921BCB5F@psc-exc-2k3.psc.state.fl.us>  
X-MS-Has-Attach: yes  
X-MS-TNEF-Correlator:  
Thread-Topic: Request for cancellation  
Thread-Index: AcaOXvmNt5+zuCoGR2qveH6D+80IFQ==  
From: "Paula Isler" <PIsler@PSC.STATE.FL.US>  
To: <tk@sailnetworks.com>  
X-OriginalArrivalTime: 12 Jun 2006 20:29:59.0523 (UTC) FILETIME=[F9C64B30:01C68E5E]

This is a multi-part message in MIME format.

-----=\_NextPart\_001\_01C68E5E.FAA62304  
Content-Type: text/plain;  
charset="us-ascii"  
Content-Transfer-Encoding: quoted-printable

Dear Mr. Kowalewski:

The Commission received your May 17th letter requesting cancellation of Sail Telecom, Inc.'s CLEC certificate in Florida (TX746). Sail also has an IXC registration with us (TJ843). Do you want to cancel the IXC certificate also?

As information, there are two types of cancellation, one is voluntary, which is granted if a company leaves in good standing and does not owe any fees. The other is involuntary, which is when a certificate is cancelled on the Commission's own motion for violation of a rule, order, or statute.

The Regulatory Assessment Fee is owed if a certificate/registration is active during any portion of a calendar year. Unfortunately, since this Commission was not notified in writing in 2005 to cancel the certificate/registration, the 2006 Regulatory Assessment Fee is also applicable. Our rules provide that a CLEC company must either pay the current year's fee, in this case the 2006 fee, or provide a date certain

it will be paid, such as 30 days after the Order is issued. The IXC must pay the current year's fee at the time it requests cancellation.

Therefore, before staff can recommend a voluntary cancellation, the company needs to comply with the cancellation rules. The 2006 Regulatory Assessment Fee return forms are attached. Since your letter stated that the company is in the process of being dissolved, it will owe only the minimum \$50 fee for each certificate/registration (\$100 total). Please let me know by June 27, 2006, how the company wishes to proceed. Let me know if you have any questions. Thanks.

Paula Isler  
Florida Public Service Commission  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399-0850  
(850) 413-6502-Phone  
(850) 413-6503-Fax  
PIsler@psc.state.fl.us



2006 MAY 22 AM 10:09

DIVISION OF  
COMPETITIVE SERVICES

May 17, 2006

RE: Sail Telecom CLEC Status  
Authority No: T-03-1081  
Certificate No.: 8405

Ms. Beth W. Salak, Director  
State of Florida  
Capital Circle Office Center  
2540 Shumard Oak Blvd.  
Tallahassee, FL 32399

Ms. Salak,

Please note and record that Sail Telecom, Inc. is in the process of being dissolved and should be removed from your records as a CLEC and Corporation. .

Thank you, for assisting us in this matter.

Sincerely,

Thomas Kowalewski  
CEO

T 3843  
TX 746

## MCD Company Information for TJ843

Printed on 06/13/2006 at 08:27:11 by PJI

Company Code: TJ843  
Complete Name: Sail Telecom, Inc.  
Mailing Name: Sail Telecom, Inc.  
Certificate No(s):  
Status: Active  
Regulation Date: 09/26/2003  
Bankruptcy: No  
Company Liaison #1: Thomas A. Kowalewski  
Title: Chairman & CEO  
Mailing Address: 9065 Barnwell Road

Physical Location: Alpharetta, GA 30022-5360  
9065 Barnwell Road

Phone: Alpharetta, GA 30022-5360  
(770) 650-5858  
Fax: (770) 650-5858

### Related Dockets:

030940-TI Acknowledgment of registration as intrastate interexchange  
telecommunications company effective September 26, 2003, by Sail  
Networks Inc.

040390-TI Acknowledgment of name change on IXC Registration No. TJ843 from  
Sail Networks Inc. to Sail Telecom, Inc.



## MCD Company Information for TX746

Printed on 06/13/2006 at 08:27:11 by PJI

Company Code: TX746  
Complete Name: Sail Telecom, Inc.  
Mailing Name: Sail Telecom, Inc.  
Certificate No(s): 8405  
Status: Active  
Regulation Date: 11/17/2003  
Bankruptcy: No  
Company Liaison #1: Thomas Kowalewski  
Title: Chairman  
Mailing Address: 9065 Barnwell Road

Physical Location: Alpharetta, GA 30022-5360  
9065 Barnwell Road

Phone: Alpharetta, GA 30022-5360  
(770) 650-5858  
Fax: (770) 650-5858

### Related Dockets:

030925-TX Application for certificate to provide competitive local exchange telecommunications service by Sail Networks Inc.

040236-TP Request for approval of amendment to interconnection agreement between BellSouth Telecommunications, Inc. and Sail Networks Inc.

040391-TX Request for approval of name change on CLEC Certificate No. 8405 from Sail Networks Inc. to Sail Telecom, Inc.

050019-TP Request for approval of Amendment No. 1 to interconnection, unbundling, resale, and collocation agreement between Verizon Florida Inc. and Sail Telecom, Inc.

050021-TP Request for approval of interconnection, unbundling, resale, and collocation agreement between Verizon Florida Inc. and Sail Telecom, Inc.