

**REQUEST TO ESTABLISH DOCKET**  
(PLEASE TYPE)

Date 10/21/98

Docket No. 981375-TC

- 1. Division Name/Staff Name Communications/Isler
- 2. OPR Communications/Isler
- 3. OCR Legal Services

4. Suggested Docket Title Cancellation by Florida Public Service Commission of Pay Telephone Certificate Number 5041 Issued to Pay-Tel Services Inc. for Violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies and 25-4.043, F.A.C., Response to Commission Staff Inquiries

5. Suggested Docket Mailing List (attach separate sheet if necessary)

- A. Provide NAMES ONLY for regulated companies or ACRONYMS ONLY regulated industries, as shown in Rule 25-22.104, F.A.C.
- B. Provide COMPLETE name and address for all others. (Match representatives to clients.)

1. Parties and their representatives (if any)

<u>Luis Alfaro</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Interested Persons and their representatives (if any)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Check one:
- Documentation is attached.
  - Documentation will be provided with recommendation.

I:\PSC\RAR\WP\ESTDKT.  
PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE  
**11732** OCT 21 88  
FPSC-RECORDS/REPORTING



# Public Service Commission

-M-E-M-O-R-A-N-D-U-M-

**DATE:** October 20th, 1998  
**TO:** Paula Isler  
**FROM:** Jackie Knight *JK*  
**RE:** RAF non payments - *First set of 80*

Paula, attached are eighty communication companies (first set) that I am forwarding to your attention who have not paid their RAF for 1997 as of today's date. Interest through the end of October is \$5.00 and Penalty is \$12.50. I have a total on the bottom of each sheet as to what amount a utility owes the Commission. I have not made copies, therefore you will need to keep the data for your files.

1	✓TF899	21	TF957	41	TG010	61	TG086
2	✓TF906	22	TF958 <i>NONE</i>	42	TG013 ✓	62	TG087
3	✓TF910 ✓	23	TF964 ✓	43	TG016	63	TG089
4	✓TF912	24	TF967 ✓	44	TG017	64	TG096 ✓
5	✓TF913 ✓	25	TF968 ✓	45	TG026 ✓	65	TG100 <i>NONE</i>
6	✓TF914	26	TF969	46	TG027 <i>NONE</i>	66	TG104
7	✓TF918	27	TF970	47	TG029	67	TG107
8	✓TF920 <i>NONE</i>	28	TF972	48	TG031 ✓	68	TG109 <i>NONE</i>
9	✓TF921 <i>NONE</i>	29	TF974	49	TG040	69	TG112 ✓
10	✓TF923	30	TF980 ✓	50	TG046	70	TG114
11	✓TF924 ✓	31	TF982	51	TG048 <i>NONE</i>	71	TG117
12	✓TF927	32	TF985 ✓	52	TG049	72	TG119 ✓
13	✓TF928	33	TF986	53	TG050	73	TG123
14	✓TF932 ✓	34	TF987	54	TG054	74	TG127
15	✓TF933 ✓	35	TF990 ✓	55	TG065	75	TG132 ✓
16	✓TF937	36	TF991	56	TG073	76	TG139 ✓
17	✓TF938 <i>NONE</i>	37	TF995 <i>NONE</i>	57	TG079	77	TG140 ✓
18	✓TF939	38	TF999	58	TG083	78	TG142
19	✓TF951	39	TG002 ✓	59	TG084 ✓	79	TG146 ✓
20	✓TF953	40	TG005 <i>NONE</i>	60	TG085	80	TG150 <i>NONE</i>

Should you have any questions, please let me know.

G:\pi3.mpl

RAF 90	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT DISCREP.	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAYS	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z	
	TF937	Pay-Tel Services In	07-Jan-97	-	-				\$0.00																	

RAF 96	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT DISCREP.	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAYS	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED	
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z		
	TF937	Pay-Tel Services In	07-Jan-97	-	-				\$0.00																		

RAF97	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT DISCREP.	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAYS	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED	
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z		
	TF937	Pay-Tel Services In	07-Jan-97	-	-				\$0.00																		

$R = 50$   
 $P = 12.50$   
 $I = 5.00$   


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 $67.50$

RAF96	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT DISCREP.	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAYS	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED	
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z		

RAF95	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	REVENUE REPORT	REGULATORY ASSESSMENT FEE	RAF PAYMENT & COLL FEE PAYMENT AMOUNT	RAF PAYMENT DISCREP.	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAYS	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED	
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z		

RAF94	CMPNY CODE	COMPANY NAME	REG DATE	INACTIVE DATE	RAF PERIOD ENDING	"X" NO RAF FORM	RAF & COLL FEE PAYMENT AMOUNT	COLL AGENCY FEE	RAF (NO EXTENSION) RECEIVED	POST MARK DATE	DEPOSIT NUMBER	PENALTY DUE 5%/30 DAYS 25% MAX	PENALTY PAID	INTEREST DUE 1%/30 DAY	INTEREST PAID	DATE DELINQNT LETTER MAILED	DATE P & I LETTER MAILED	DAYS OF EXT	EXTENSIO AMOUNT D 75%/15 DA 1.5%/30 DA	EXT AMOUNT PAID "RAF"	DATE TRUE-UP MAILED	TRUE-UP AMOUNT RECEIVED "RAF"	TRUE-UP P & I RECEIVED			
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t	u	v	w	x	y	z	

Total: \$67.50

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
  
**TF937**

4a. Article Number

- 4b. Service Type
- Registered  Certified
  - Express Mail  Insured
  - Return Receipt for Merchandise  COD

7. Date of Delivery  
**12/13/97**

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)  
**X** *Partha Chatterjee*

Thank you for using Return Receipt Service.

<b>SENDER:</b> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4, 5, and 6. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		LAUDERDALE FL 333 08-21-94 13:49 I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: PAY-TEL SERVICES INC. ATTN: Luis Alfardo 6660 S.W. 41st Place Davie, FL 33314-3320		4a. Article Number P174 241 773	
5. Received By: (Print Name) Margarita R de Alfaro		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) X		7. Date of Delivery 1-20-12	
		8. Addressee's Address (Only if requested and fee is paid)	

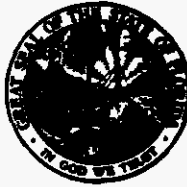
Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.



STATE OF FLORIDA

Commissioners:  
JULIA L. JOHNSON, CHAIRMAN  
J. TERRY DEASON  
SUSAN F. CLARK  
JOE GARCIA  
E. LEON JACOBS, JR.



DIVISION OF COMMUNICATIONS  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

Public Service Commission

January 9, 1998

File Number  
TF937.9701

PAY-TEL SERVICES INC.  
ATTN: Luis Alfaro  
6660 S.W. 41st Place  
Davie, FL 33314-3320

CERTIFIED LETTER

Dear Payphone Provider:

The Commission staff has not received your response to our previous letter concerning the violations listed below. For your convenience, you may complete the enclosed Service Violation Correction Form as your response. Please provide an explanation of the action taken to correct the violation(s), sign, and return the form within 15 calendar days.

Failure to correct these violations and respond to this letter may result in a fine being imposed and/or your pay telephone certificate being cancelled.

NUMBER	PAY PHONE ADDRESS	CITY	VIOLATION ITEMS	EVAL DATE
3056819841	14060 NW 7TH AVE.	MIAMI	4 5 6 10 11 14 23	12/08/97

If you have any questions, please contact me at 850/413-6504 or fax at 850/413-6505.

Sincerely,

Barbara H. Bailey  
Research Assistant  
Bureau of Service Evaluation

*9-16-98. Love to Paula to cancel with RAEs docked*  
RAB

*Yins 2-10-98  
954 791-1581*

*no answer*

*(2-12-98  
Sounds like fax line)*

*3-2-98 - leaving home*

*4-3-98 - left msg*

*4-24-98. 954. 791-1581 - sounds like fax*

*5-7-98 - sounds like fax*

*5-21-98 sounds like fax*

*(DA) 954 - 764-6788 - left msg - Ft. Lauderdale - don't know if same co.*

*6-2-98 - fax*

*7-10-98 - fax #*

*8-3-98 - fax #*

*9-10-98 fax*

January 9, 1998

SERVICE VIOLATION CORRECTION FORM  
PAY-TEL SERVICES INC.

TF937.9701

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

NUMBER

CORRECTION

3056819841 \_\_\_\_\_

January 9, 1998

File Number

TF937.9701

EVALUATOR'S COMMENTS CONCERNING VIOLATIONS

3056819841

Please contact us at 904/413-6504 if you have questions.



PAY TELEPHONE EVALUATION ITEMS

ITEMS	DESCRIPTION
1	Telephone was not in service.
2	Telephone was not accessible to the physically handicapped.
3	Telephone number plate did not have proper information displayed.
4	Address of responsible party for refunds/repairs was not displayed.
5	Coin free number for repairs/refunds did not work properly.
6	Current directory was not available.
7	Extended Area Service and Local calls were not posted.
8	Wiring not properly terminated or in poor condition.
9	Address of pay phone location was not displayed.
10	Instrument was not reasonably clean.
11	Enclosure was not adequate or free of trash.
12	Glass was chipped or broken.
13	Insufficient light to read instructions at night.
14	Name of provider (as it appears on certificate) was not displayed.
15	Name of IXC was not correctly posted.
16	Clear and accurate dialing instructions were not displayed.
17	Statement of services not available was not displayed.
18	Automatic coin return function did not operate properly.
19	Incoming calls could not be received/or bell did not ring loud enough.
20	Direct coin free service to the local operator did not work.
21	Direct coin service to local Directory Assistance did not work.
22	Access to all available interexchange carriers was not available.
23	Coin free service to 911 did not work.
24	911 center could not verify the street address of the pay phone.
25	Transmission was not adequate or contained noise.
26	Reserved for future use.
27	Combinations of nickels and dimes did not operate correctly.
28	Dial pad did not function after call was answered.
29	0 + area code + local number did not go to LEC operator as required.

STATE OF FLORIDA

Commissioners:  
JULIA L. JOHNSON, CHAIRMAN  
J. TERRY DEASON  
SUSAN F. CLARK  
DIANE K. KIESLING  
JOE GARCIA



DIVISION OF COMMUNICATIONS  
WALTER D'HAESELEER  
DIRECTOR  
(850) 413-6600

**Public Service Commission**

December 18, 1997      File Number  
TF937.9701

PAY-TEL SERVICES INC.  
ATTN: Luis Alfaro  
6660 S.W. 41st Place  
Davie, FL 33314-3320

Dear Payphone Provider:

Service evaluations have been completed on the pay phones listed below. Violation items are referenced on the attached Evaluation Items Form. Please use the Service Violation Correction Form to provide an explanation of the action taken to correct the violation(s). The Service Violation Correction Form must be signed and returned to the Commission staff within 15 calendar days. We suggest you verify that all pay phones you own, that have these same violations, are corrected since fines imposed by the Commission for continuing violations of its pay telephone standards range from \$100 to \$15,000.

NUMBER	PAY PHONE ADDRESS	CITY	VIOLATION ITEMS	EVAL DATE
3056819841	14060 NW 7TH AVE.	MIAMI	4 5 6 10 11 14 23	12/08/97

If you have any questions, please contact me at 850/413-6504 or fax at 850/413-6505.

Sincerely,

*Barbara H. Bailey*  
Barbara H. Bailey  
Research Assistant  
Bureau of Service Evaluation

December 18, 1997

SERVICE VIOLATION CORRECTION FORM  
PAY-TEL SERVICES INC.

TF937.9701

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

NUMBER

CORRECTION

3056819841

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December 18, 1997

File Number

TF937.9701

EVALUATOR'S COMMENTS CONCERNING VIOLATIONS

3056819841

Please contact us at 904/413-6504 if you have questions.

**PAY TELEPHONE EVALUATION ITEMS**

<b>ITEMS</b>	<b>DESCRIPTION</b>
1	Telephone was not in service.
2	Telephone was not accessible to the physically handicapped.
3	Telephone number plate did not have proper information displayed.
4	Address of responsible party for refunds/repairs was not displayed.
5	Coin free number for repairs/refunds did not work properly.
6	Current directory was not available.
7	Extended Area Service and Local calls were not posted.
8	Wiring not properly terminated or in poor condition.
9	Address of pay phone location was not displayed.
10	Instrument was not reasonably clean.
11	Enclosure was not adequate or free of trash.
12	Glass was chipped or broken.
13	Insufficient light to read instructions at night.
14	Name of provider (as it appears on certificate) was not displayed.
15	Name of IXC was not correctly posted.
16	Clear and accurate dialing instructions were not displayed.
17	Statement of services not available was not displayed.
18	Automatic coin return function did not operate properly.
19	Incoming calls could not be received/or bell did not ring loud enough.
20	Direct coin free service to the local operator did not work.
21	Direct coin service to local Directory Assistance did not work.
22	Access to all available interexchange carriers was not available.
23	Coin free service to 911 did not work.
24	911 center could not verify the street address of the pay phone.
25	Transmission was not adequate or contained noise.
26	Reserved for future use.
27	Combinations of nickels and dimes did not operate correctly.
28	Dial pad did not function after call was answered.
29	0 + area code + local number did not go to LEC operator as required.

NJN-LEC PAY TELEPHONE EVALUATION FORM

✓ 5041

Area Code 305 Number 681-9841  
 PROVIDER NAME Not Posted Pay-Tel Ecs. com  
 PAY PHONE ADDRESS 14060 N.W. 7th Ave  
 PAY PHONE CITY Miami  
 FILE NUMBER TF 937, 9701 (leave blank)  
 EVALUATOR BM EVALUATION DATE 12/8/97  
 DIVISION CMU Operator Service Provider (OSP) ClearTel  
(Dial 0 + interLATA # & no other digits, write in name of OSP above)

	N/E	SAT	UN SAT	CODE
Telephone was in service (could originate & receive calls) <u>Sec. 88</u>		✓		1
Telephone was accessible to the physically handicapped (see back)		✓		2
Legible & correct telephone number was displayed		✓		3
Address of responsible party for refunds/repairs displayed			X	4
Coin free number for repairs/refunds works properly			X	5
Current directory is available <u>NO DIRECT</u>			X	6
Extended Area Service and Local Calls \$0.25 or less (Dial EAS number as shown in local directory to verify amount being charge)		✓		7
Wiring properly terminated and in good condition		✓		8
Correct address of pay phone location is displayed		✓		9
Instrument reasonably clean			X	10
Enclosure was adequate and free of trash			X	11
Glass is not chipped or broken		✓		12
Sufficient light to read instructions at night		✓		13
Certificate name of provider is displayed		✓	X	14
Local Telephone Company responsibility disclaimer is displayed <u>IXC</u>		✓		15
Clear and accurate dialing instructions are displayed		✓		16
Statement of services not available is displayed		✓		17
Automatic coin return functions properly		✓		18
Incoming calls can be received (and bell rings and can be heard)		✓		19
There was direct free service to the local operator		✓		20
There was direct free service to local directory assistance		✓		21
Access to all available interexchange carriers was available (see back)		✓		22
There was coin free service to 911 / Answer Time <u>37 sec</u>		X	X	23
The 911 center could verify the street address of the pay phone		✓		24
Transmission was adequately strong and free of noise or static		✓		25
Dial 0 = (904 413-8812 + card number - time call for 90 seconds)		✓		26
Combination of nickels and dimes operated properly		✓		27
Dial pad functioned after call was answered		✓		28
Dial 0 + local area code + local number to verify call goes to the LEC operator		✓		29

NOT DISRA  
BUSY TONE

Dirty  
Trash

911 is busy

N/E = Not Evaluated  
 This is Q:\FORMS\WPI\PATPAY1.PRT - back of form is Q:\FORMS\WPI\PATPAY2.LS Revised 10/21/97.  
 \* Record Answer Time when payphone evaluation done as part of LEC Service Evaluation.

LOCAL COIN RATE 25¢ CALL DURATION 15 min LOCAL DA RATE \_\_\_\_\_