DIMON OF TELECOMMUNICATION EIVED BUREAU OF CERTIFICATION AND SERVICE EVALUATION SU AUC EVALUATION SUBMINISTENT

APPLICATION FORM for AUTHORITY TO PROVIDE ALTERNATIVE LOCAL EXCHANGE SERVICE WITHIN THE STATE OF FLORIDA

991032-TX

Instructions

- This form is used as an application for an original certificate and for approval of the assignment or transfer of an existing certificate. In the case of an assignment or transfer, the information provided shall be for the assignee or transferee (See Appendix A).
- Print or type all responses to each item requested in the application and appendices. If an item is not applicable, please explain why.

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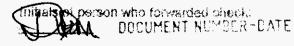
 Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of <u>\$250.00</u> to:

> Florida Public Service Commission Division of <u>Records and Reporting</u> 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6770

If you have questions about completing the form, contact:

Florida Public Service Commission Division of Telecommunications Bureau of Certification and Service Evaluation 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6600

FORM PSC/CMU 8 (11/95) Required by Commission Rule Nos. 25-24.805, 25-24.810, and 25-24.815 Clinical received with films and Minwarded to Fiscul for deposit Miscel to forward a copy of shock to RAR with proof of deposit



FPSC-RECORDS/REPORTING

09236 AUG-48

APPLICATION

- 1. This is an application for $\sqrt{}$ (check one):
 - (X) Original certificate (new company).
 - Approval of transfer of existing certificate: <u>Example</u>, a non-certificated company purchases an existing company and desires to retain the original certificate of authority.
 - Approval of assignment of existing certificate: <u>Example</u>, a certificated company purchases an existing company and desires to retain the certificate of authority of that company.
 - Approval of transfer of control: <u>Example</u>, a company purchases 51% of a certificated company. The Commission must approve the new controlling entity.
- 2. Name of company:

ONE EZ CALL, INC.

- 3. Name under which the applicant will do business (fictitious name, etc.): SAME
- 4. Official mailing address (including street name & number, post office box, city, state, zip code):

PO BOX 1311, Middleburg FL 32050

 Florida address (including street name & number, post office box, city, state, zip code):

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4395 Lori Loop, Keystone Heights FL 32656

FORM PSC/CMU 8 (11/95) Required by Commission Rule Nos. 25-24.805, 25-24.810, and 25-24.815

DOCUMENT NUMBER-DATE

09236 AUG-48

FPSC-RECORDS/REPORTING

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6	Structure	of organization:
	()For ()Ger	vidual (X) Corporation eign Corporation () Foreign Partnership neral Partnership () Limited Partnership er
7.	<u>If individ</u>	ual, provide:
	Name:	
	Title:	
	Address	
	City/Stat	e/Zip:
	Telephor	ne No.: Fax No.:
	Internet	E-Mail Address:
	Internet '	Website Address:
8.	If incorp	orated in Florida, provide proof of authority to operate in Florida:
	(a) 	The Florida Secretary of State corporate registration number: P99000066393
9.	lf foreigr	corporation, provide proof of authority to operate in Florida:
	(a)	The Florida Secretary of State corporate registration number:
10.		ictitious name-d/b/a, provide proof of compliance with fictitious name Chapter 865.09, FS) to operate in Florida:
	(a)	The Florida Secretary of State fictitious name registration number:

FORM PSC/CMU 8 (11/95) Required by Commission Rule Nos. 25-24.805, 25-24.810, and 25-24.815

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- 11. If a limited liability partnership, provide proof of registration to operate in Florida:
 - (a) The Florida Secretary of State registration number:
- 12. If a partnership, provide name, title and address of all partners and a copy of the partnership agreement.

	Name:
	Title:
	Address:
	City/State/Zip:
	Telephone No.: Fax No.:
	Internet E-Mail Address:
	Internet Website Address:
13.	If a foreign limited partnership, provide proof of compliance with the foreign limited partnership statute (Chapter 620.169, FS), if applicable.
	(a) The Florida registration number:
14.	Provide F.E.I. Number(if applicable): Applied for pending
15.	Indicate if any of the officers, directors, or any of the ten largest stockholders have previously been:
	(a) adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings. <u>Provide</u> explanation.

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None

(b) an officer, director, partner or stockholder in any other Florida certificated telephone company. If yes, give name of company and relationship. If no longer associated with company, give reason why not.

 None			
Who will serve as liaison to the Commission with regard to the following?			
(a) The application:			
Name: Laura Cordingley			
Title:Chief Executive Officer			
Address: 4395 Lori Loop			
City/State/Zip:Keystone Heights FL 32656			
Telephone No.: 352-473-7312 Fax No.:			
Internet E-Mail Address:IH8Az0zl@aol.com			
Internet Website Address:			
(b) Official point of contact for the ongoing operations of the company:			
Name: Same as above			
Title:			
Address:			
City/State/Zip:			
Telephone No.: Fax No.:			
Internet E-Mail Address:			

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Required by Commission Rule Nos. 25-24.805, 25-24.810, and 25-24.815

	Internet Website Address:					
	(c)	Complaints/Inquiries from customers:				
	Nar	ne:Same as above				
	Titl	Ð:				
		Address:				
	City/State/Zip:					
		ephone No.: Fax No.:				
	Inte	rnet E-Mail Address:				
		met Website Address:				
17.	List the states in which the applicant:					
	(a)					
		NONE				
<u> </u>						
	(b)	has applications pending to be certificated as an alternative local exchange company.				
		NONE				
<u> </u>	(C)	is certificated to operate as an alternative local exchange company.				
		NONE				

(d) has been denied authority to operate as an alternative local exchange company and the circumstances involved.

NONE

(e) has had regulatory penalties imposed for violations of telecommunications statutes and the circumstances involved.

NONE			
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(f) has been involved in civil court proceedings with an interexchange carrier, local exchange company or other telecommunications entity, and the circumstances involved.

NONE

18. Submit the following:

A. Financial capability.

The application **should contain** the applicant's audited financial statements for the most recent 3 years. If the applicant does not have audited financial statements, it shall so be stated.

The unaudited financial statements should be signed by the applicant's chief executive officer and chief financial officer <u>affirming that the financial statements</u> are true and correct and should include:

- 1. the balance sheet;
- 2. income statement; and
- 3. statement of retained earnings.

NOTE: This documentation may include, but is not limited to, financial statements, a projected profit and loss statement, credit references, credit bureau reports, and descriptions of business relationships with financial institutions.

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Further, the following (which includes supporting documentation) should be provided:

- 1. **written explanation** that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.
- 2. written explanation that the applicant has sufficient financial capability to maintain the requested service.
- 3. written explanation that the applicant has sufficient financial capability to meet its lease or ownership obligations.
- B. Managerial capability: give resumes of employees/officers of the company that would indicate sufficient managerial experiences of each.
- C. Technical capability: give resumes of employees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance.

** APPLICANT ACKNOWLEDGMENT STATEMENT **

- 1. **REGULATORY ASSESSMENT FEE:** I understand that all telephone companies must pay a regulatory assessment fee in the amount of <u>.15 of one percent</u> of 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 that a seven percent sales tax must be paid on intra and interstate revenues.
- 4. **APPLICATION FEE:** 1 understand that a non-refundable application fee of \$250.00 must be submitted with the application.

UTILITY OFFICIAL: mainale Signature 3.52-Telephone No. Title Address: 4395 LORI LOOP Fax No. Seystone Heights FL 32656

ATTACHMENTS:

A - CERTIFICATE SALE, TRANSFER, OR ASSIGNMENT STATEMENT B - INTRASTATE NETWORK C - AFFIDAVIT

** APPENDIX C **

AFFIDAVIT

By my signature below, I, the undersigned officer, attest to the accuracy of the information contained in this application and attached documents and that the applicant has the technical expertise, managerial ability, and financial capability to provide alternative local exchange company service in the State of Florida. I 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.

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."

	OFFICIAL:
haw	ra Cordingley
Signature	
~	AUREI COLLENIC

Date

352-473-7312

Telephone No.

Address: 439.5 LORI LOOP Keystone Hts FL 3-1656

Title

Fax No.

BALANCE SHEET AS OF AUGUST 3, 1999

Cash Line-of-Credit (Compass Bank)	\$ 5,589 <u>20,000</u>
Total	25,589

I certify the foregoing is true and correct as of this date.

Laura Cordingley, CEO One EZ Call, Inc.

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August 3, 1999

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PROJECTED INCOME STATEMENT

THROUGH DECEMBER 2002

TOTAL PROJECTED SALES	\$966,574
TOTAL PROJECTED COST OF SALES	392,082
TOTAL PROJECTED EXPENSES	<u>441,652</u>
TOTAL PROJECTED PROFIT(LOSS)	\$132,840

I certify the foregoing is true and correct as of this date.

anning

Laura Cordingley, CEO One EZ Call, Inc. August 3, 1999

STATEMENT OF ADDITIONAL ASSETS

The Chief Executive Officer, Laura Cordingley, and the Chief Financial Officer, Thomas Cordingley, are prepared to pledge the following assets in support of said business:

- 1. Additional home equity line of credit
- 2. Sale of real estate other than primary residence
- 3. Sale of stocks, bonds and other short-term assets
- 4. Personal funds from other employment

I certify the foregoing is true and correct as of this date.

Laura Cordingley, CEO U One EZ Call, Inc.

August 3, 1999

Thomas Cordingley,

One EZ Call, Inc.

August 3, 1999

APPLICABLE BUSINESS EXPERIENCE

OF

LAURA CORDINGLEY CEO, ONE EZ CALL, INC.

- 1. Over five year's experience managing all aspects of two-person sales office (customer service, sales inquiries, bookkeeping, purchasing, etc).
- 2. Eight year's experience as customer service representative in a call-center telecommunications environment.
- 3. Fifteen year's experience in advertising and marketing.
- 4. Created office management system and managed accounts payable for a Florida-based Kentucky C-LEC.

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 1

TITLE SHEET

FLORIDA TELECOMMUNICATIONS PRICE LIST

This price list contains the descriptions, regulations, and rates applicable to the furnishing of service and facilities for alternative local exchange telecommunications services provided by One EZ Call, Inc, with principal offices at 4395 Lori Loop, Keystone Heights FL 32656. This price list is on file with the Florida Public Service Commission, and copies may be inspected during normal business hours at the Company's principal place of business.

ISSUED: JULY 20, 1999

EFFECTIVE:

BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 2

CHECK SHEET

The sheets listed below, which are inclusive of this price list, are effective as of the date shown at the bottom of the respective sheet. Original and revised sheets as named below comprise all changes from the original price list and are currently in effect as of the date on the bottom of this page.

SHEET	REVISION
1	ORIGINAL
2	ORIGINAL
3	ORIGINAL
4	ORIGINAL
5	ORIGINAL
6	ORIGINAL
7	ORIGINAL
8	ORIGINAL
9	ORIGINAL
10	ORIGINAL
11	ORIGINAL

ISSUED: JULY 20, 1999

EFFECTIVE:

BY:

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FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 3

TABLE OF CONTENTS

Title Sheet 1	1
Check Sheet	2
Table of Contents	5
Symbols Sheet	ŀ
Price List Format Sheets	5
Price List Format Sheets, Cont'd 6	5
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Section 2 – Rules and Regulations 8	į
Section 2 – Rules and Regulations, Cont'd 9	i
Section 3 – Basic Service Descriptions and Rates10)
Section 4 – Miscellaneous Services11	1

ISSUED: JULY 20, 1999

EFFECTIVE: _____

BY:

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FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 4

SYMBOLS

The following are the only symbols used for the purposes indicated below:

- **D** Delete or Discontinue
- I Change Resulting In An Increase to A Customer's Bill
- M Moved From Another Price List Location
- N New
- R Change Resulting In a Reduction To A Customer's Bill
- T Change in Text or Regulation But No Change in Rate or Charge

ISSUED: JULY 20, 1999

EFFECTIVE: _____

BY:

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FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 5

PRICE LIST FORMAT SHEETS

A. Sheet Numbering – Sheet numbers appear in the upper right corner of the page. Sheets are numbered sequentially. However, new sheets are occasionally added to the price list. When a new sheet is added between sheets already in effect, a decimal is added. For example, a new sheet added between sheets 14 and 15 would be 14.1.

B. Sheet Revision Numbers – Revision numbers also appear in the upper right corner of each page. These numbers are used to determine the most current sheet version on file with the FPSC. For example, the 4th revised Sheet 14 cancels the 3rd revised Sheet 14. Because of various suspension periods, deferrals, etc, the FPSC follows their price list approval process, the most current sheet number on file with the Commission is not always the price list page in effect. Consult the Check Sheet for the sheet currently in effect.

C. Paragraph Numbering Sequence – There are nine levels of paragraph coding. Each level of coding is subservient to its next level:

2. 2.1. 2.1.1. 2.1.1.A. 2.1.1.A.1 2.1.1.A.1.(a). 2.1.1.A.1.(a).! 2.1.1.A.1.(a).!(i). 2.1.1.A.1.(a).!.(i).

ISSUED: JULY 20, 1999

EFFECTIVE:

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BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 6

PRICE LIST FORMAT SHEETS, CONTINUED

D. Check Sheets – Wen a price list filing is made with the FPSC, an updated check sheet accompanies the price list filing. The check sheet lists the sheets contained in the price list filing. The check sheet lists the sheets contined in the price list with a cross reference to the current revision number. When new pages are added, the check sheet is changed to reflect the revision. All revisions made in a given filing are designated by an asterisk (*). There will be not other symbols used on this page if these are the only changes made to it, (i.e., the format, etc. remains the same, just revised revision levels on some pages). The price list user should refer to the latest check sheet to find out if a particular sheet is the most current on file with the FPSC.

ISSUED: JULY 20, 1999

EFFECTIVE:

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BY:

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FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 7

SECTION 1 - TECHNICAL TERMS AND ABBREVIATIONS

Access Line – An arrangement which connects the Customer's location to the Company's network switching center.

Company or Carrier - One EZ Call, Inc.

<u>Customer</u> – The person, firm, corporation or other entity which orders service and is responsible for payment of charges due, and compliance with the Company's tariff regulations.

<u>Holidays</u> – The Company-recognized holidays are New Year's Day, Memorial Day, July 4th, Labor Day, Thanksgiving Day, and Christmas Day.

Message - A completed telephone call.

Exchange – The entire telephone plant and facilities used in providing telephone service to subscribers located in an exchange area.

ISSUED: JULY 20, 1999

EFFECTIVE: _____

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BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 8

SECTION 2 - RULES, REGULATIONS AND SERVICE QUALITY CRITERIA

2.1 Undertaking of: One EZ Call, Inc.

2.2 Limitations: Local Prepaid Phone Service Only. This does not include an extended local calling area, long distance, collect, or third-party billing calls. In the event we are unable to block these calls, the customer is responsible for any and all charges incurred.

- 2.3 Liabilities of the Company: The Company and or its dealers will be held harmless against claims or damages arising from accidental disconnect, including, but not limited to any inability to access 911.
- 2.4 Service Availability: Service is to the residence and/or business only. The customer is responsible for maintaining the wiring and jacks along with his or her telephone within the agreed upon residence or business.
- 2.5 Interruption of Service: Non-Payment of Regulated Charges on a specified date, as agreed upon between the Customer and the Company, will result in a disconnection of service. Any reconnection would involve a reconnection charge of <u>\$50,00</u>.
- 2.6 Deposits and Advance Payments: A one-time non-refundable processing fee of \$50.00 will be due at the time of application along with the first month's prepaid phone service charge of \$50.00.
- 2.7 Taxes: All applicable taxes will be billed monthly to the customer. Applicable taxes will not be collected along with the one time processing fee; therefore, the Customer's first billing may appear slightly higher than originally quoted.

ISSUED: JULY 20, 1999

EFFECTIVE: _____

BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 9

SECTION 2 - RULES, REGULATIONS AND SERVICE QUALITY CRITERIA

- 2.8 Billing periods: A Customer's billing period will commence on the actual date the service was connected, and will be due every 30 days from the connection date.
- 2.9 Refunds/Credits: A request for a refund or credit, for whatever reason, must be made in writing by the Customer and mailed to: One EZ Call, Inc, PO Box 1311, Middleburg FL 32050-1311. The request for the refund or credit will be reviewed and the Customer will either receive the refund/credit or an explanation as to why no refund/credit is due. Said notification will be given to the Customer within 30 days of receipt of the original request.

ISSUED: JULY 20, 1999

EFFECTIVE: _____

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BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 10

SECTION 3 - BASIC SERVICE DESCRIPTION AND RATES

3.1 Service Description: Basic local phone service with 911 access, operator services, and relay services. Service does not included an extended calling area or long distance.

3.2 Rates:

Local Monthly Charges: \$50.00 Initial Customer Connection Charge \$50.00

3.3 Hearing and Speech Impaired Customers

3.3.1 Directory Assistance

There shall be no charge for up to fifty calls per billing cycle from lines or trunks serving individuals with the aforementioned disabilities. The Company shall charge the prevailing price list rates for every call in excess of 50 within a given billing cycle.

3.3.2 Telecommunications Relay Service

For calls received from the Relay Service, the Company will, when billing relay calls, discount relay service calls by 50% off the otherwise applicable rate for non-relay calls, except where either party is both hearing and visually impaired, in which case the call shall be discounted by 60% off the otherwise applicable rate for volce non-relay calls.

ISSUED: JULY 20, 1999

EFFECTIVE: _____

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BY:

FLORIDA PRICE LIST NO. 1 ORIGINAL SHEET 11

SECTION 4 - MISCELLANEOUS SERVICES

4.1 Additional Features

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Non-published Number	\$ 6.00/month
Call Waiting	\$ 6.00/month
Caller ID	\$12.00/month

4.2 Non-routine Installation and Maintenance

At the Customer's request, installation and/or maintenance may be performed outside the Company's regular business hours, or (in the Company's sole discretion and subject to any conditions it may impose) in hazardous locations. IN such cases, charges are based on the cost of labor, material, and any other costs incurred by or charged to the Company. If installation is started during regular business hours, but at the Customer's request, extends beyond regular business hours into time periods including, but not limited to weekends, holidays, and/or night hours, additional charges may apply.

4.3 Directory Listings

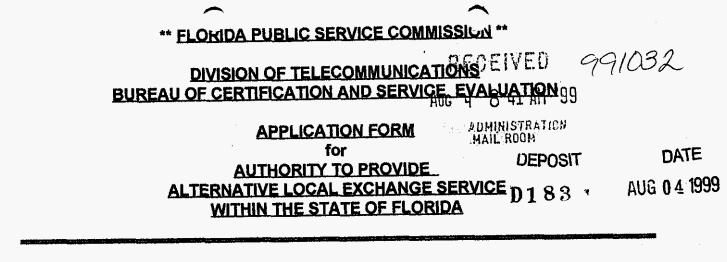
One listing, termed the Initial Listing, is included with each Customer's Service Request.

ISSUED: JULY 20, 1999

EFFECTIVE:

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BY:



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Once completed, submit the original and six (6) copies of this form along with a non-refundable application fee of **\$250.00** to:

Florida Public Service Commission Division of <u>Records and Reporting</u> 2540 Shumard Oak Blvd. Tallahassee, Florida 32399-0850 (850) 413-6770

If you have questions about completing the form, contact:

Florida Public Service Commission Division of Telecommunications

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<u></u>	
THOMAS J. OR LAURA CORDINGLEY	7752
4395 LORI LOOP KEYSTONE HEIGHTS, FL 32656	63-7927/2630 BRANCH 001
Pay to the Ilorida PSC	\$ 250 00
Juo hundred fifty +	Dollars Dollars Determine
P.O. BOX 4505, MORSONMLE ROMAN 32225 506	
For	Tausa Cordingley
	7752 0