



ORIGINAL

00 FEB -7 AM 8:53  
MAIL ROOM

VIA FACSIMILE & CERTIFIED MAIL

January 27, 2000

Ms. Blanca Bayo  
Director  
Division of Records and Reporting  
Florida Public Service Commission  
2540 Shumard Oak Blvd  
Tallahassee, Florida 32399-0850

Reference: Docket No. 991962-TX

Dear Ms. Bayo:

The referenced docket has been initiated by the Division of Records and Reporting to cancel the Alternative Local Exchange Telecommunications Certificate No. 4818 issued to OpTel (Florida) Telecom d/b/a OpTel for violation of Rule 25-4.0161 F.A.C. and failure to pay regulatory assessment fees for its 1998 operations. Due to a series of internal reorganizations, the company had inadvertently neglected to remit the requisite fees to the Commission. Please be advised that this oversight has been corrected. On this date, a check in the amount of \$68.50 has been sent to the attention of Mr. Frank Harrison, Division of Administration. This remittance covers the Regulatory Assessment Fee, Late Payment Penalties, and interest. In addition, the company remitted the 1999 Regulatory Assessment Fee. OpTel is now current on all balances due for regulatory assessments in Florida.

Please note that OpTel has taken steps to ensure that future payments of Regulatory Assessment Fees will be remitted in a timely manner. OpTel's Finance Department has created a regulatory assessment function and appointed an individual to administer all regulatory assessments owed by the company. A payment schedule tracking the description and amount of all such fees has been created and is updated as the company expands its operations.

By this letter, OpTel submits a settlement offer to resolve the pending docket before the Commission. OpTel proposes a \$100.00 settlement in lieu of the \$500.00 fine normally imposed for this rule violation. Ms. Paula Isler, the staff member assigned to this docket, has advised OpTel that this settlement has been accepted by the Commission in similar cases. It is OpTel's hope that the Commission will recognize the efforts the company has undertaken to resolve this matter quickly and accept its settlement offer.

Thank you for your consideration of OpTel's proposal. Should you have any questions pertaining to this matter, please feel free to contact me at 214-634-3896.

Sincerely,

Diane J. Harbaugh  
Manager, Regulatory Affairs

- AFA \_\_\_\_\_
- APP \_\_\_\_\_
- CAF \_\_\_\_\_
- CMU \_\_\_\_\_
- CTR \_\_\_\_\_
- EAG \_\_\_\_\_
- LEG \_\_\_\_\_
- MAS \_\_\_\_\_
- OPC \_\_\_\_\_
- RRR \_\_\_\_\_
- SEC \_\_\_\_\_
- WAW \_\_\_\_\_
- OTH \_\_\_\_\_

DOCUMENT NUMBER - DATE

~~XXXXXXXXXX~~ FEB -7 8



VIA OVERNIGHT MAIL

January 27, 2000

Mr. Frank Harrison  
Division of Administration  
Florida Public Service Commission  
2540 Shumard Oak Blvd  
Tallahassee, Florida 32399-0850

Reference: 1999 Regulatory Assessment Fees  
TVMAX Telecommunications Inc. d/b/a OpTel

Dear Mr. Harrison:

Enclosed please find completed documentation and a check in the amount of \$121.13 for payment of the 1999 Regulatory Assessment Fee by TVMAX Telecommunications Inc. d/b/a OpTel. In addition, a payment of \$50.00 is enclosed to cover the 1999 regulatory assessment fee for the company's interexchange operations.

Should you have any questions pertaining to this matter, please feel free to contact me at 214-634-3896.

Sincerely,

A handwritten signature in black ink, appearing to read "Diane J. Harbaugh". The signature is written in a cursive, flowing style.

Diane J. Harbaugh  
Manager, Regulatory Affairs

Shared-Tenant Service Provider Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TS176  
OpTel  
1111 W. Mockingbird Lane, 10th Floor  
Dallas, TX 75247

PERIOD COVERED:  
01/01/1999 TO 12/31/1999

FOR PSC USE ONLY	
Check#	_____
\$	0603003
	003001
\$	P
	0603003
	004011
\$	I
Postmark Date	_____
Initials of Preparer	_____

Please Complete Below If Official Mailing Address Has Changed

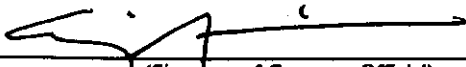
\_\_\_\_\_  
(Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	AMOUNT
1.	Gross Intrastate Operating Revenue	\$ 80,754.47
2.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	_____
3.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 1 less Line 2)	80,754.47
4.	Regulatory Assessment Fee Due (Multiply Line 3 by 0.0015)	121.13
5.	Penalty For Late Payment (see "3. Failure to File by Due Date" on back)	_____
6.	Interest For Late Payment (see "3. Failure to File by Due Date" on back)	_____
7.	TOTAL AMOUNT DUE	\$ 121.13

\* These amounts must be intrastate only and must be verifiable.

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

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)

CONTROLLER  
\_\_\_\_\_  
(Title) 1/25/00  
(Date)

CRAIG MZLACEK  
\_\_\_\_\_  
(Preparer of Form - Please Print Name)

Telephone Number (214) 634-3800 Fax Number (214) 634-3872

F.E.I. No. 95-4498704



Interexchange Company Regulatory Assessment Fee Return

Florida Public Service Commission

(See Filing Instructions on Back of Form)

STATUS:

- Actual Return
- Estimated Return
- Amended Return

TI592  
OpTel  
1111 West Mockingbird Lane, Suite 1000  
Dallas, TX 75247

PERIOD COVERED:  
01/01/1999 TO 12/31/1999

**FOR PSC USE ONLY**

Check# \_\_\_\_\_

\$ \_\_\_\_\_ 0603001  
003001

\$ \_\_\_\_\_ P  
0603001  
004011

\$ \_\_\_\_\_ I

Postmark Date \_\_\_\_\_

Initials of Preparer \_\_\_\_\_

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	\$ 59,396.00	\$ 19,719.47
2.	Access Services	-	-
3.	Private Line Services	-	-
4.	Leased Facilities & Circuits Services	-	-
5.	Miscellaneous Services	-	-
6.	TOTAL Telephone Services	\$ 59,396.00	\$ 19,719.47
7.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)	( )	( )
8.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		19,719.47
9.	Regulatory Assessment Fee Due (Multiply Line 8 by 0.0015)		50.00
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.	TOTAL AMOUNT DUE		\$ 50.00

\* These amounts must be intrastate only and must be verifiable.

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

CURRENT COMPANY STATUS

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

BILLING INFORMATION

Complete below if billing agent if other than yourself.

What is the total amount of customer deposits collected? (Address: City/State/Zip) (Telephone)

Amount: \$ \_\_\_\_\_ for 19 \_\_\_\_\_

What is the total amount of bond held (if applicable)?

Amount: \$ \_\_\_\_\_ Expires: \_\_\_\_\_

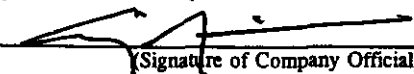
COMPANY INFORMATION

Do you lease telecommunications' facilities?  YES  NO

If YES, who do you lease these facilities from? Name: TCE

Address: P.O. BOX 10226, NEWARK, NJ 07193-0226

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)

CRAIG MILACEK  
(Preparer of Form - Please Print Name)

CONTROLLER  
(Title)

1/25/00  
(Date)

Telephone Number (214) 634-3800 Fax Number (214) 634-3870

F.E.I. No. 95-4498704





VIA OVERNIGHT MAIL

January 27, 2000

Mr. Frank Harrison  
Division of Administration  
Florida Public Service Commission  
2540 Shumard Oak Blvd  
Tallahassee, Florida 32399-0850

Reference: 1998 and 1999 Regulatory Assessment Fees  
OpTel (Florida) Telecom, Inc.

Dear Mr. Harrison:

Enclosed please find completed documentation and a check in the amount of \$68.50 to cover 1998 Regulatory Assessment Fees, Late Payment Penalties, and interest payments due from OpTel (Florida) Telecom, Inc. Due to a series of reorganizations, OpTel inadvertently neglected to remit the fee to the Commission prior to this time. Please note that I have also enclosed the 1999 RAF form and 1999 regulatory assessment fee for the company.

Should you have any questions pertaining to this matter, please feel free to contact me at 214-634-3896.

Sincerely,

A handwritten signature in cursive script, appearing to read "Diane J. Harbaugh".

Diane J. Harbaugh  
Manager, Regulatory Affairs

# Alternative Local Exchange Company Regulatory Assessment Fee Return

STATUS:

Actual Return  
 Estimated Return

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

TX070  
 OpTel  
 1111 West Mockingbird Lane, Suite 1000  
 Dallas, TX 75247

FOR PSC USE ONLY	
Check#	
\$	0603006
	003001
\$	P
	0603006
	004011
\$	I
Postmark Date	
Initials of Preparer	

PERIOD COVERED:  
 01/01/1998 TO  
 12/31/1998

Please Complete Below If Official Mailing Address Has Changed

\_\_\_\_\_  
 (Name of Company) (Address) (City/State) (Zip)

LINE NO.	ACCOUNT CLASSIFICATION	GROSS OPERATING REVENUE	INTRASTATE REVENUE
1.	Basic Local Services	\$ 0.00	\$ 0.00
2.	Long Distance Services	-	-
3.	Access Services	-	-
4.	Private Line Services	-	-
5.	Leased Facilities & Circuits Services	-	-
6.	Miscellaneous Services	-	-
7.	TOTAL REVENUES For Regulatory Assessment Fee Calculation		\$ 0.00
8.	Regulatory Assessment Fee Due (Multiply Line 7 by 0.0015)		50.00
9.	Penalty for Late Payment		12.50
10.	Interest for Late Payment		6.00
11.	TOTAL AMOUNT DUE		\$ 68.50

AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50

### CURRENT COMPANY STATUS

Facilities-Based Provider  Reseller  
 Other: COMPANY IS NOT OPERATING AS AN ALEC IN FLORIDA AT THIS TIME.

### BILLING INFORMATION

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

  
 (Signature of Company Official) CONTROLLER (Title) 1/24/99 (Date)  
 CRATC MILACEK (Please Print Name) Telephone Number (214) 634-3800 Fax Number (214) 634-3870  
 F.E.I. No. 05-4498704





# Alternative Local Exchange Company Regulatory Assessment Fee Return

## Florida Public Service Commission

(See Filing Instructions on Back of Form)

**STATUS:**

- Actual Return
- Estimated Return
- Amended Return

TX070  
OpTel  
1111 West Mockingbird Lane, Suite 1000  
Dallas, TX 75247

**PERIOD COVERED:**  
01/01/1999 TO 12/31/1999

**FOR PSC USE ONLY**

Check# \_\_\_\_\_

\$ \_\_\_\_\_ 0603006  
003001

\$ \_\_\_\_\_ P  
0603006  
004011

\$ \_\_\_\_\_ I

Postmark Date \_\_\_\_\_

Initials of Preparer \_\_\_\_\_

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	\$ 0.00	\$ 0.00
2.	Long Distance Services (IntraLATA only)**	-	-
3.	Access Services	-	-
4.	Private Line Services	-	-
5.	Leased Facilities & Circuits Services	-	-
6.	Miscellaneous Services	-	-
7.	<b>TOTAL REVENUES</b>		\$ 0.00
8.	LESS: Amounts Paid to Other Telecommunications Companies* (see "2. Fees" on back)		-
9.	Net Intrastate Operating Revenue for Regulatory Assessment Fee Calculation (Line 7 less Line 8)		0.00
10.	Regulatory Assessment Fee Due (Multiply Line 9 by 0.0015)		50.00
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.	<b>TOTAL AMOUNT DUE</b>		\$ 50.00

\* These amounts must be intrastate only and must be verifiable.  
\*\* Other long distance revenue must be listed on the Interexchange Regulatory Assessment Fee Return.

**AS PROVIDED IN SECTION 364.336, FLORIDA STATUTES, THE MINIMUM ANNUAL FEE IS \$50**

**CURRENT COMPANY STATUS**

- Facilities-Based Provider
- Reseller
- Other: COMPANY IS NOT OPERATING AS AN ALEC IN FLORIDA AT THIS TIME

**BILLING INFORMATION**

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

\_\_\_\_\_  
(Signature of Company Official)  
CRAIG MILACEK  
**(Preparer of Form - Please Print Name)**

\_\_\_\_\_  
CONTROLLER (Title)  
1/24/99 (Date)

Telephone Number (214) 634-3800 Fax Number (214) 634-3870  
F.E.I. No. 95-4498704

