COVINGTON & BURLING

1201 PENNSYLVANIA AVENUE, N. W P.O. BOX 7566 WASHINGTON, D.C. 20044-7566 (202) 662-6000

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September 29, 1999

## ORIGINA

LECONFIELD HOUSE CURZON STREET LONDON WIT BAS ENGLAND TELEPHONE: 44-171-495-5655 FACSIMILE: 44-171-495-3101 KUNSTLAAN 44 AVENUE DES ARTS BRUSSELS 1040 BELGIUM TELEPHONE: 32-2-549-5230 FACSIMILE: 32-2-502-1598

MARY NEWCOMER WILLIAMS DIRECT DIAL NUMBER (202) 662-5244 DIRECT FACSIMILE NUMBER

(202) 778-5244 mwilliams@cov.com

#### VIA FEDERAL EXPRESS

Florida Public Service Commission Division of Records and Reporting 2540 Shumard Oak Boulevard Tallahassee, FL 32399-0850

991482-TX

#### **Application of Pathnet, Inc. for** Re: Authority to Provide Alternative Local Exchange Service

To Whom It May Concern:

Submitted herewith for filing, on behalf of Pathnet, Inc. ("Pathnet"), are an original and six (6) copies of an Application for Authority to Provide Alternative Local Exchange Service Within the State of Florida, along with a check for the non-refundable application fee of \$250. Because Pathnet initially plans to provide Alternative Access Vendor services, and will not provide dial tone service, it is not submitting a price list with this application. Should Pathnet in the future decide to provide dial tone service, it will file the appropriate price list before initiating service.

Enclosed is an additional copy of this transmittal letter. Please stamp the additional copy and return it to me in the enclosed, self-addressed envelope as an acknowledgment of receipt.

Any questions regarding this application may be directed to the undersigned or to:

Gerard Waldron Covington & Burling 1201 Pennsylvania Avenue, N.W. P.O. Box 7566 Washington, D.C. 20044-7566 (202) 662-5360.

Respectfully submitted.

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Mary Newcomer Williams Attorney for Pathnet, Inc.

MENT NUMBER-DATE

Enclosures

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FPSC-RECORPS/REPORTING

# ORIGINAL

### \*\* FLORIDA PUBLIC SERVICE COMMISSION \*\*

### DIVISION OF TELECOMMUNICATIONS BUREAU OF CERTIFICATION AND SERVICE EVALUATION

#### APPLICATION FORM

#### for <u>AUTHORITY TO PROVIDE</u> <u>ALTERNATIVE LOCAL EXCHANGE SERVICE</u> <u>WITHIN THE STATE OF FLORIDA</u>

#### 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.
- Use a separate sheet for each answer which will not fit the allotted space.
- 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

DOCUMENT NUMBER-DATE

FPSC-RECORDS/REPORTING

### 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:

Pathnet, Inc.

3. Name under which the applicant will do business (fictitious name, etc.):

Pathnet Communications, Inc.

4. Official mailing address (including street name & number, post office box, city, state, zip code):

10	)15	<u> 31st</u>	Street,	<u>N.W.</u>
			, D.C.	

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

None

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6. Structure of organization:

-

<ul> <li>( ) Individual ( ) Corporation</li> <li>( <b>x</b> ) Foreign Corporation ( ) Foreign Partnership</li> <li>( ) General Partnership ( ) Limited Partnership</li> <li>( ) Other</li> </ul>			
If individual, provide:			
Name:			
Title:			
Address:			
City/State/Zip:			
Telephone No.: Fax No.:			
Internet E-Mail Address:			
Internet Website Address:			
If incorporated in Florida, provide proof of authority to operate in Florida:			
(a) The Florida Secretary of State corporate registration number:			
If foreign corporation, provide proof of authority to operate in Florida:			
(a) The Florida Secretary of State corporate registration number:			
<u>F98000004582</u> Registration certificate attached as Exhibit C <u>If using fictitious name-d/b/a.</u> provide proof of compliance with fictitious name statute (Chapter 865.09, FS) to operate in Florida:			

(a) The Florida Secretary of State fictitious name registration number:

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

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 <u>F.E.I. Number</u> (if applicable):N/A
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.
	None

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(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.

	Who will serve as liaison to the Commission with regard to the following?				
	(a) The application:				
	Name: <u>Gerard J. Waldron, Esg.</u>				
	Title:Covington & Burling Address:Address:				
	City/State/Zip: Washington, D.C. 20044-7566				
	Telephone No.: 202/662-5360 Fax No.: 202/778-5360				
	Internet E-Mail Address: <u>gwaldron@cov.com</u>				
	Internet Website Address:_www.cov.com				
	(b) Official point of contact for the ongoing operations of the company:				
	Name: William C. Cotta				
	Title: Vice President				
	Address:1015_31st_Street, N.W.				
1	City/State/Zip:Washington, D.C. 20007				
	202/625-7284 Telephone No.: <u>877/PATHNOC</u> ax No.: <u>202/625-7369</u>				
	City/State/Zip: Washington, D.C. 20007				

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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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None

Internet Website Address: www.pathnet. net (c) Complaints/Inquiries from customers: Name: William C. Cotta Title: Vice President Address: 1015 31st Street, N.W. City/State/Zip: Washington, D.C. 20007 202/625-7284 Telephone No.: 877/PATHNOC Fax No.: 202/625-7369 Internet E-Mail Address: wcotta@pathnet.net Internet Website Address: www.pathnet.net

17. List the states in which the applicant:

(a) has operated as an alternative local exchange company.

Applicant is not currently operating as an alternative local <u>exchange company in any state</u>. For the past year, Applicant has provided -- on a private carrier basis -- interstate transport services to existing carriers in Montana, Nebraska, <u>Colorado</u>, Wyoming, Kansas, Texas and Louisiana using a pointto-point digital microwave system.

to-point digital microwave system. (b) has applications pending to be certificated as an alternative local exchange company.

Pathnet plans to file applications to provide competitive telecommunications service in each of the lower 48 states and the District of Columbia. To date, Pathnet has applications pending in the following states: Colorado, Illinois, Indiana, Iowa, Nebraska, Oregon, Texas and Wyoming.

(c) is certificated to operate as an alternative local exchange company.

Applicant has applications pending in several states and has

registered in Montana and provided notice of intent to provide service in Idaho.

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

(e)	has had regulatory penalties imposed for violations of telecommunications
	statutes and the circumstances involved
None	
(f)	has been involved in civil court proceedings with an interexchange carrier local exchange company or other telecommunications entity, and the circumstances involved.
None	

A. Financial capability. Attached as Exhibit A

The application <u>should contain</u> 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. <u>written explanation</u> that the applicant has sufficient financial capability to provide the requested service in the geographic area proposed to be served.
- 2. <u>written explanation</u> that the applicant has sufficient financial capability to maintain the requested service.
- 3. <u>written explanation</u> 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. Attached as Exhibit B
- C. Technical capability: give resumes of emprovees/officers of the company that would indicate sufficient technical experiences or indicate what company has been contracted to conduct technical maintenance **Attached as Exhibit B**

### \*\* APPLICANT ACKNOWLEDGINENT 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 pusiness. 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: I understand that a non-refundable application fee of \$250.00 must be submitted with the application.

UTILITY OFFIC Signature

Daté

Vice President, General Counsel Title and Secretary

202/625-7284 Telephone No.

202/625-7369

Fax No.

Address: 1015 31st Street, N.W.

Washington, D.C. 20007

ATTACHMENTS:

- N/A A CERTIFICATE SALE, TRANSFER, OR ASSIGNMENT STATEMENT
- N/A B INTRASTATE NETWORK

C - AFFIDAVIT

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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#### \*\* 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 dury shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 and s. 775.083."

UTILITY OFFICIAL: Mubael Aubri	9/1+/99
Signature	Date
Vice President, General Counsel Title and Secretary	202/625-7284 Telephone No.
Address: 1015 31st Street, N.W.	202/625-7369 Fax No.
Washington, D.C. 20007	