State of Florida

RECEIVED Fühlic Service Commiss

CAPITAL GIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD
TALLAHASSEE. FI ODIDA 22200 0000

COMMISSION CI ERK

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

DATE:

May 20, 2009

TO:

Office of Commission Clerk (Cole)

FROM:

Division of Regulatory Compliance (R. Kennedy)

Office of the General Counsel (A. Teitzman)

RE:

Application for Certificate to Provide Pay Telephone Service

AGENDA:

6/2/2009 - Consent Agenda - Proposed Agency Action - Interested

Persons May Participate

SPECIAL INSTRUCTIONS:

None

FILE NAME AND LOCATION:

S:\PSC\RCP\WP\090259.RCM.DOC

Please place the following Application for Certificate to Provide Pay Telephone Service on the consent agenda for approval.

DOCKET NO.	COMPANY NAME					CERT. NO.
090259-TC	Fairwinds Treatment	•	Inc.	d/b/a	Fairwinds	8762

The Commission is vested with jurisdiction in this matter pursuant to Sections 364.335 and 364.3375, Florida Statutes. Pursuant to Section 364.336, Florida Statutes, certificate holders must pay a minimum annual Regulatory Assessment Fee if the certificate is active during any portion of the calendar year. A Regulatory Assessment Fee Return Notice will be mailed each December to the entity listed above for payment by January 30.

> DOCUMENT NUMBER-DATE 04984 MAY 20 8