

REQUEST TO ESTABLISH DOCKET
(PLEASE TYPE)

Date 6/19/97

Docket No. 970749-TC

1. Division Name/Staff Name COMMUNICATIONS/Hawkins

2. OPR _____

3. OCR _____

4. Suggested Docket Title Request for cancellation of Pay Telephone Certificate No. 3686 by SOHAIL SHAHZADA d/b/a DYNATEL

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

(TFO34)

- 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)

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

2. Interested Persons and their representatives (if any)

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

6. Check one:

Documentation is attached.

Documentation will be provided with the recommendation.

PLEASE COMPLETE THIS PAGE AND RETURN TO:

Ms. Brenda H. Hawkins, Regulatory Analyst
FLORIDA PUBLIC SERVICE COMMISSION
Division of Communications
Capital Circle Office Center
2540 Shumard Oak Boulevard
Tallahassee, FL 32399-0850



NAME: SOHAIL SHAHZADA

NAME OF COMPANY: DYNATEL

ADDRESS: 2062 ST. MARTINS DR. W.

CITY/STATE/ZIP: JACKSONVILLE, FL 32246

PHONE # W/AREA CODE: (904) 221-0991

CERTIFICATE #: 3686 COMPANY CODE: TF034

(Answer "YES" to one of the following statements below.)

 (1) I request that my certificate be cancelled and enclosed is my Regulatory Assessment Fee, penalty and interest owed to date.

YES (2) I am not able to submit my Regulatory Assessment Fee, penalty and interest at this time, but will submit it WHEN I RECEIVE THE FORMS + AMOUNT OWED FOR THIS YEAR.
date

Explain why you are requesting cancellation of your certificate.

I am requesting cancellation of my certificate because I HAVE MOVED FROM JACKSONVILLE + NO LONGER AM IN THE BUSINESS FOR WHICH THE CERTIFICATE WAS REQUIRED. I WILL CALL CHARLES BYRNE + REQUEST REG. ASSESS. FEE FORMS AT MY NEW ADDRESS. THANKS,

SIGNATURE: *Sohail Shahzada* DATE: 6/16/97