

REQUEST TO ESTABLISH DOCKET

(PLEASE TYPE)

Date 27
10/29/98

Docket No. 981455-TC

1. Division Name/Staff Name Communications/Isler
2. OPR Communications/Isler
3. OCR Legal Services

4. Suggested Docket Title Cancellation by Florida Public Service Commission of Pay Telephone Certificate Number 5351 Issued to Joseph Wayne Waters for Violation of Rules 25-4.0161, F.A.C., Regulatory Assessment Fees; Telecommunications Companies and 25-24.520, F.A.C., Reporting Requirements

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

- 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. (Hatch representatives to clients.)

1. Parties and their representatives (if any)

Wayne Waters

2. Interested Persons and their representatives (if any)

6. Check one:

Documentation is attached.

Documentation will be provided with recommendation.

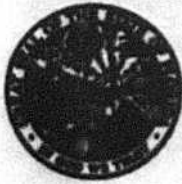
I:\PSC\RAR\WP\ESTDKT.

PSC/RAR 10 (Revised 01/96)

DOCUMENT NUMBER-DATE

12105 OCT 29 98

ST. RECORDS/REPORTING



Public Service Commission

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

DATE: October 20th, 1998
 TO: Paula Isler
 FROM: Jackie Knight *JN*
 RE: RAF non payments - *First set of 80*

Paula, attached are eighty communication companies (first set) that I am forwarding to your attention who have not paid their RAF for 1997 as of today's date. Interest through the end of October is \$5.00 and Penalty is \$12.50. I have a total on the bottom of each sheet as to what amount a utility owes the Commission. I have not made copies, therefore you will need to keep the data for your files.

1	✓TF899	21	TF957	41	TG010	61	TG086
2	✓TF906	22	TF958 <i>NONE</i>	42	TG013 ✓	62	TG087
3	✓TF910 ✓	23	TF964 ✓	43	TG016	63	TG089
4	✓TF912	24	TF967 ✓	44	TG017	64	TG096 ✓
5	✓TF913 ✓	25	TF968 ✓	45	TG026 ✓	65	TG100 <i>NONE</i>
6	✓TF914	26	TF969	46	TG027 <i>NONE</i>	66	TG104
7	✓TF918	27	TF970	47	TG029	67	TG107
8	✓TF920 <i>NONE</i>	28	TF972	48	TG031 ✓	68	TG109 <i>NONE</i>
9	✓TF921 <i>NONE</i>	29	TF974	49	TG040	69	TG112 ✓
10	✓TF923	30	TF980 ✓	50	TG046	70	TG114
11	✓TF924 ✓	31	TF982	51	TG048 <i>NONE</i>	71	TG117
12	✓TF927	32	TF985 ✓	52	TG049	72	TG119 ✓
13	✓TF928	33	TF986	53	TG050	73	TG123
14	✓TF932 ✓	34	TF987	54	TG054	74	TG127
15	✓TF933 ✓	35	TF990 ✓	55	TG065	75	TG132 ✓
16	✓TF937	36	TF991	56	TG073	76	TG139 ✓
17	✓TF938 <i>NONE</i>	37	TF995 <i>NONE</i>	57	TG079	77	TG140 ✓
18	✓TF939	38	TF999	58	TG083	78	TG142
19	✓TF951	39	TG002 ✓	59	TG084 ✓	79	TG146 ✓
20	✓TF953	40	TG005 <i>NONE</i>	60	TG085	80	TG150 <i>NONE</i>

Should you have any questions, please let me know.

G:\pi3.mpl

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

R: 50.50
 F: 12.50
 I: 67.50

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

COMPANY	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	DATE	AMOUNT	TYPE	DESCRIPTION	
...

Total: \$67.50

MEMORANDUM

April 14, 1998

TO: Rick Moses, Division of Communications
FROM: Nonnye Grant, Division of Records and Reporting
RE: Returned Mail

We have received returned mail from the United States Post Office on the following Company:

JOSEPH WAYNE WATERS (TG049)

The Post Office returned the mail on the above Company stating the following reason(s):

Addressee Unknown
 Attempted - Not Known
 Box Closed - No Order
 Forwarding Order Expired
 Insufficient Address
 Moved, Left No Forwarding Address
 No Forward Order on File
 No Mail Receptacle/Vacant
 No Such Person or Number
 No Such Office in State
 No Such Street
 Not at this Address
 Refused
 Return to Sender
 Return for Better Address
 Unable to Forward
 Unable to Locate
 Unclaimed
 Undeliverable as Addressed
 Vacant
 Verification of Address furnished by Post Office

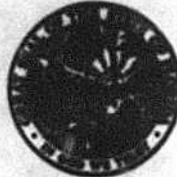
Please furnish us with a current address, both for mail and location. Also, we need to have new phone and fax numbers since they have moved. Should you not be able to get a current address, can staff initiate proceedings to have the Company's certificate canceled?

Copy of returned envelope attached for your information.

/nbg
Attachment(s)

STATE OF FLORIDA

Commissioners:
JULIA L. JOHNSON, CHAIRMAN
J. TERRY DEASON
SUSAN F. CLARK
JOE GARCIA
E. LEON JACOBS, JR.



DIVISION OF RECORDS & REPORTING
BLANCA S. BAYO
DIRECTOR
(850) 413-6770

Public Service Commission

March 11, 1998

Joseph Wayne Waters
P. O. Box 292273
Temple Terrace, FL 33687-2273

RECEIVED

MAR 23 1998

FPSC - Records/Reporting

Dear Sir or Madam:

The Commission is reviewing its information on regulated utilities. Please check the information below and note any change(s) on this letter, and return the letter to us within 15 days of receipt. Pursuant to Commission Rule 25-22.005(7), F.A.C., any future changes in this information must be reported to us in writing. Thank you for your cooperation.

Sincerely,

WATE273 336873146 1398 21 03/18/98
WATERS RETURN TO SENDER
BOX CLOSED
UNABLE TO FORWARD
RETURN TO SENDER

B. Bayo
196

Joseph Wayne Waters

Location:
8308 North 46th Street
Tampa, FL 33617-6908

Mailing Address:
P. O. Box 292273
Temple Terrace, FL 33687-2273

Liaison Officer(s):
Wayne Waters, Owner. (813) 988-2082

FAX No(s): _____
Internet e-mail address: _____
Internet home page address: _____
FEID Number: _____
Company Code: TGU49 Certificate(s): 5351

Date Completed: _____ By: _____

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

TG049

4a. Article Number

4b. Service Type

<input type="checkbox"/> Registered	<input type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt Merchandise	<input type="checkbox"/> COD

5. Received By: (Print Name)

7. Date of Delivery

6. Signature (Addressee or Agent)

X *[Signature]*

8. Addressee's Address (Only if requested and fee is paid)



Thank you for using Return Receipt Service.