## State of Florida





## Public Service Commission

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

DATE:

August 9, 2000

TO:

Blanco Bayo, Director, Division of Records and Reporting

FROM:

Toni J. McCoy, Regulatory Analyst, Division of Regulatory Oversight

SUBJECT:

Open Docket No. 000839-TC

Please add the attached letter and additional application information to the docket file.

Call me if you have any questions, I can be reached at 850/413-6532.

Thank you.



DOCUMENT NUMBER - DATE

FPSC-RECORDS/REPORTING

## STATE OF FLORIDA

Commissioners: JOE GARCIA, CHAIRMAN J. TERRY DEASON SUSAN F. CLARK E. LEON JACOBS, JR. LILA A. JABER



DIVISION OF REGULATORY OVERSIGHT DAN HOPPE, DIRECTOR (850) 413-6480

## Public Service Commission

Athi toni McCoy

July 17, 2000

Mr. Cliff Wilson, President 377 Wilbur Avenue, Suite 178 Swansea, MA 02777

Pay Telephone Application/Docket No. 000839-TC

Dear Mr. Wilson:

The Commission has received your application for a Pay Telephone Certificate of Public Convenience and Necessity. In order for your certification request to be processed, please comply with the following:

- 1) The application you submitted was incomplete. Please complete the highlighted areas on the marked pages and return them to my attention. You may fax a copy to me at 850/413-6533 to expedite your certification, but I will still need the originals mailed in for your Docket File. Be sure that you familiarize yourself with Florida's Pay Telephone Rules which have also been included in the packet for your review.
- 2) TeleVend, Inc. does not show registered with Florida's Secretary of State as a foreign corporation doing business in Florida. Please register TeleVend, Inc., complete the application page where indicated with the assigned Florida corporate registration number, and return it to my attention as instructed above.

If you have any questions, please call me at 850/413-6532. Please respond to this correspondence by September 18, 2000.

Regulatory Analyst

Telecommunications Certification

Enclosure - PATS Application Packet

2. Name under which applicant will do business (fictitious name, etc.):  3. Official mailing address:  Street:  P.O. Box:  City:  State:  P.O. Box:  City:  State:  Zip:  5. Structure of organization:  ( ) Individual  ( ) Corporation  ( ) General Partnership  ( ) Limited Partnership  ( ) Other:		Name of company or name of individual (not fi	ctitious name or d/b/a):
3. Official mailing address:  Street:  P.O. Box:  City: State: P.O. Box: City: P.O. Box: City: State:  Street: P.O. Box: City: State: Structure of organization: () Individual () Corporation () General Partnership () Limited Partnership () Other:			
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( ) Other:		( ) Limited Partnership	
		( ) Other:	
TO THE REPORT OF THE PROPERTY			thorth to operate in Florida
8. If incorporated in Florida, provide proof of authority to operate in Florida:	6.		directly to operate in the local
Florida Secretary of State Corporate Registration Number:		Florida Secretary of State Corporate Registration Number:	10000000433 W
Farm PSC/CHU-22 (62/99)	Jana D	96¢/040-92 (62/99)	****** ** *** ***
Required by Commission Rule Nos. 25-24.510 & 25-34.511	Regul	red by Counteston Fale Nos. 25-24.510 & 25-34.511	**** A TO

08/08/00	TUE	11:45	FAX	508 ~	6538

Televend, Inc.

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	12. Indicate if applicant or any subsidiary, partner, officers, directors, or any stockholder has been previously adjudged bankrupt, mentally incompetent, or found guilty of any felony or of any crime, or whether such actions may result from pending proceedings.
	If so, provide explanation: NO
independent of the second seco	
	3. Has the applicant or any subsidiary, partner, officer, director, or any stockholder ever been granted or denied a pay selephone certificate in the State of Florida? (This includes active and canceled pay telephone certificates.) If yes, provide
<u></u>	explanation and list the certificate holder and certificate number.
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1	4. Is the applicant or any subsidiary, partner, officer, director, or any stockholder a subsidiary, partner, or officer in any other Florida certificated pay telephone company? If yes, give name of company and relationship. If no longer associated with company, give reason why not.
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