

44 Wall Street, 6th Floor  
New York, NY 10005

TEL: 212.607.2004  
FAX: 212.635.5074



ORIGINAL

April 10, 2006

Missouri Public Service Commission  
Adjudication Division – Data Center  
P.O. Box 360  
Jefferson City, MO 65102-0360

FILED

APR 12 2006

Re: Case No. PA-2006-0355

Missouri Public  
Service Commission

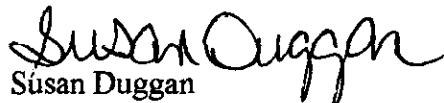
Dear Sir or Madam:

Pursuant to your Notice of Deficiency letter received March 20, 2006, please find enclosed (1) Original and (8) Copies of an Amended Application for a Certificate of Service Authority to provide Pay Telephone Service in the state of Missouri for Empire Payphones, Inc. with the required signature of a member of The Missouri Bar. We apologize for the inadvertent omission of this necessary information.

Should there be any further information needed, please do not hesitate to contact me at the following:

**Empire Payphones, Inc.**  
**C/o Susan Duggan – Regulatory Administrator**  
**Operations Division**  
**1490 Westfork Drive**  
**Suite G**  
**Lithia Springs, GA 30122**  
**(770) 819-1600 Extension 1333**  
**sduggan@empirepayphones.com (Email)**

Respectively,

  
Susan Duggan  
Regulatory Administrator

BEFORE THE PUBLIC SERVICE COMMISSION  
OF THE STATE OF MISSOURI

In the matter of the application of )  
EMPIRE PAYPHONES )  
INC. )  
for certificate of service authority )  
to provide private pay telephone )  
service within the State of Missouri )

ORIGINAL

FILED

APR 12 2006

APPLICATION FOR CERTIFICATE OF SERVICE  
AUTHORITY TO PROVIDE PRIVATE PAY TELEPHONE  
SERVICE IN THE STATE OF MISSOURI

PLEASE PRINT OR TYPE:

Empire Payphones, Inc.

Missouri Public  
Service Commission

1. NAME OF APPLICANT

DATE OF APPLICATION

ADDRESS OF PRINCIPAL PLACE OF BUSINESS:

Street: 44 Wall Street

6th Floor

City: New York

State: NY 10005

Phone: (212) 607-2004

If the Commission or Staff has questions about this  
Application, they should contact:

Name: Susan Duggan - Regulatory Administrator

Address: 1490 Westfork Drive, Suite C

Lithia Springs, GA 30122

Daytime Phone: (770) 819-1600 Extension 1333

Email: sduggan@empirepayphones.com

APPLICANT IS:

☐ INDIVIDUAL DOING BUSINESS UNDER OWN NAME

☐ INDIVIDUAL DOING BUSINESS UNDER FICTITIOUS NAME (Attach a copy of registration of fictitious name  
with Secretary of State)

☐ PARTNERSHIP (Attach copy of partnership agreement - Missouri Bar Attorney must file the application)

☐ MISSOURI CORPORATION (Attach certified copy of Articles of Incorporation and Certificate of Incorporation  
from Secretary of State - Missouri Bar Attorney must file the application)

☒ CORPORATION - NOT MISSOURI (Attach certificate of authorization to do business in Missouri from  
Secretary of State - Missouri Bar Attorney must file the application) \*See Attached

- IMPORTANT -

PAGES 2, 3, AND 4 MUST BE ATTACHED AND APPLICATION MUST BE SIGNED AND NOTARIZED ON PAGE 4 TO BE  
PROCESSED. IF APPLICANT IS A PARTNERSHIP OR CORPORATION, APPLICATION MUST BE SIGNED BY AN  
AUTHORIZED MEMBER OR CORPORATE OFFICER, NOTARIZED, AND SIGNED BY APPLICANT'S ATTORNEY.

Revised 6/19/2003

APPLICATION SHOULD BE MAILED TO BOTH:

Missouri Public Service Commission  
P.O. Box 360  
Jefferson City, MO 65102  
(Original and 8 copies)

Office of the Public Counsel  
P.O. Box 7800  
Jefferson City, MO 65102  
(One copy)

2. Applicant proposes to provide private pay telephone service in the State of Missouri under the jurisdiction of the Missouri Public Service Commission (Commission) pursuant to Section 392.410 and 392.520 C.C.S.S.C.S. HB 360 and which is referred to therein as customer owned coin telephone telecommunications service, but will herein be referred to as private pay telephone service, and requests certificate of service authority to install, operate, control, manage and maintain private pay telephone(s).
3. Applicant requests that this certificate of service authority be made applicable to additional locations which may be served by the Applicant in the future.
4. As a provider of private pay telephone service, I agree that my private pay telephone equipment (hereafter equipment) shall have the following operational characteristics and I agree to abide by the following terms:
  - a. Users of the equipment shall be able to reach the operator without charge and without the use of a coin.
  - b. Any intrastate operator services provider employed shall hold a certificate of service authority from this Commission, and shall have on file with the Commission approved tariffs for the provision of operator services to traffic aggregators.
  - c. Users of the equipment shall be able to reach local 911 emergency service, where available, without charge and without using a coin or, if 911 is unavailable, there shall be a prominent display on each instrument of the required procedure to reach local emergency service without charge and without using a coin.
  - d. The equipment shall be mounted in accordance with all applicable Federal, State, and local laws for disabled and/or hearing impaired persons.
  - e. The equipment shall allow the completion of local and long distance calls.
  - f. The equipment shall permit access to directory assistance.
  - g. There shall be displayed in close proximity to the equipment in 12 Point Times Bold print the name, address and telephone number of the private pay telephone service provider, the procedures for reporting service difficulties, the method of obtaining customer refunds and the method of obtaining long distance access. If applicable, the notice shall state that one-way calling only is permitted. If an alternative operator service (AOS) provider is employed, the private pay telephone service provider shall display such notice as is required by this Commission.
  - h. The equipment shall be registered under Part 68 of the rules of the Federal Communications Commission's registration program.
  - i. The equipment shall not block access to any local or interexchange telecommunications carrier.
5. I understand and agree that the certificate of service authority will permit me to provide only private pay telephone service in the State of Missouri and will not authorize me to provide any other telecommunications services regulated by the Commission.

Revised 6/19/2003

6. I understand that the certificate of service authority to provide private pay telephone service is not transferable.
7. I understand that providing pay telephone service without a certificate of service authority or in violation of the terms and conditions prescribed for the provision of such service may subject me to penalties as provided for by law.
8. I agree to provide a complete list of served locations if this information is requested by the Commission Staff.
9. I further agree to notify the Commission, in writing, if I cease to provide private pay telephone service in the State of Missouri or if my address or phone number changes at my principal place of business.
10. Unless and until otherwise ordered by the Commission, I agree to pay my annual apportioned share of general regulator expenditures that are charged to telephone companies pursuant to Section 386.370 RSMo.
11. I understand and agree that I will be responsible to the local exchange telephone company for payment of all toll and local charges originating from or accepted at the private pay telephone(s).
12. I understand and agree that charges for private pay telephone service will be assessed in accordance with the appropriate tariff of the local exchange telephone company providing access.

WHEREFORE, Applicant requests the Commission to grant its certificate of service authority to Applicant to install, operate, control, manage and maintain private pay telephone service in the State of Missouri as described above.

SIGN HERE: \_\_\_\_\_

PRINT or  
TYPE NAME:

Andoni Economou - Executive VP & COO

ADDRESS:

44 Wall Street, 6th Floor

New York, NY 10005

PHONE:

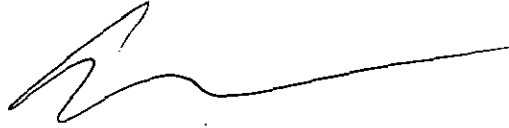
(212) 607-2004

STATE OF NEW YORKCOUNTY OF NEW YORK

§ 5

Comes now before me Andoni Economidou and states that (s)he  
(Name of person signing Application)Exec. VP & COO of Empire Payphones, Inc. Applicant herein, and (Title  
of person signing Application) (Name of Applicant)

further states that the information contained in this Application is accurate to the best of her/his knowledge and belief.

Subscribed and sworn to before me this 6 day of April, 2006David E. Aronow  
Notary Public, State of New York  
No. 02AR5080242  
Qualified in New York County  
Commission Expires June 18, 2007

(Notary Public)

My Commission expires: \_\_\_\_\_

ATTORNEYS SIGNATURE BLOCK (for Partnership or Corporation)

SIGN HERE: Charles H. HeleinPRINT or  
TYPE NAME: Charles H. HeleinADDRESS: 8180 Greensboro Drive Suite 700  
McLean, VA 22102MISSOURI  
BAR #: 18227PHONE: 703-714-1301

Revised 6/19/2003

# STATE OF MISSOURI



Robin Carnahan  
Secretary of State

## CERTIFICATE OF AUTHORITY

WHEREAS,

*Empire Payphones, Inc.*  
F00718949

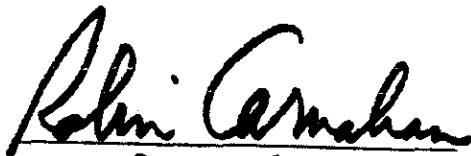
using in Missouri the name

*Empire Payphones, Inc.*

has complied with the General and Business Corporation Law which governs Foreign Corporations; by filing in the office of the Secretary of State of Missouri authenticated evidence of its incorporation and good standing under the Laws of the State of New York.

NOW, THEREFORE, I, ROBIN CARNAHAN, Secretary of State of the State of Missouri, do hereby certify that said corporation is from this date duly authorized to transact business in this State, and is entitled to all rights and privileges granted to Foreign Corporations under the General and Business Corporation Law of Missouri.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 22nd day of February, 2006.

  
Secretary of State

