

Ectory R. Lawless

From: Lisa Foust
Sent: Tuesday, May 14, 2019 2:09 PM
To: Ectory R. Lawless
Cc: Jaclyn Hammons
Subject: FW: COCOT Cancellation Request: Jaroth, Inc.
Attachments: Jaroth, Inc. Cancellation Request.pdf

Tori,

Can you put a copy of this COCOT cancellation request in Docket No. 02-00788? I will get them on the next Conference for cancellation.

Thanks,
Lisa Foust
Utilities Division
TN PUC

From: Jaclyn Hammons
Sent: Tuesday, May 14, 2019 1:48 PM
To: Lisa Foust
Subject: COCOT Cancellation Request: Jaroth, Inc.

Lisa,

Please see the attached COCOT cancellation request from Jaroth, Inc.

Below is their company information. Please let me know if you need any additional information.

Company ID: 128794
Name: Jaroth, Inc.
Docket Number: 02-00788

Sincerely,
Jax

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Jaclyn Hammons

02-00788

From: Tori Chen <toric@zumcoholdings.com>
Sent: Tuesday, May 14, 2019 12:46 PM
To: Jaclyn Hammons
Subject: Reequst to cancel COCOT certificate
Attachments: AE NorCal 19051411420.pdf

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Good Afternoon,

Please see attached.

Tori Chen
Accounting Administrator
Zumco Holdings, LLC
PTS Providers, Inc.
Office: 925-553-3771
Fax: 925-217-4110
ToriC@ZumCoholdings.com
3130 Crow Canyon Place Suite 210
San Ramon, CA 94583



TENNESSEE PUBLIC UTILITY COMMISSION
2018-2019 INSPECTION FEE
FOR CUSTOMER OWNED COIN OPERATED (OR COINLESS) TELEPHONES

Company ID: 128794

Jaroth Inc.
2001 Crow Canyon Road
Suite 200
San Ramon, CA 94583-5388

Please calculate and submit to the TPUC your company's appropriate COCOT inspection fee by July 1, 2019. Failure to submit the proper fees could result in the disconnection of your COCOTs.

1. Total number of COCOTs operated by your company as of July 1, 2018 _____
2. Total number of COCOT additions between July 1, 2018 and June 30, 2019 _____
3. Total number of COCOT deletions between July 1, 2018 and June 30, 2019 _____
4. Total COCOTs as of June 30, 2019
(line 1 plus line 2, subtract line 3) _____
5. **Fee due (Total COCOTS shown on line 4 x \$10.00)** \$ _____
If Line 4 is 0 and you wish to retain your authority, please send fee of \$10.00.

I, the undersigned owner, president, or officer of the above named COCOT provider, being first duly sworn, on oath, state the number of COCOTs operated by said company and the inspection fee computed therefrom are accurate.

NAME _____
(Please Print)

SIGNATURE _____

FAX NO _____

TITLE _____

TELEPHONE _____

EMAIL _____

If you are no longer in this business and would like to cancel your authority, please sign below.

**PLEASE CANCEL MY AUTHORITY TO OPERATE COCOTS IN TENNESSEE, AS I HAVE
CLOSED THE TELECOM BUSINESS.** 

Please return form with enclosed payment to:

Tennessee Public Utility Commission
Attn: Chris Eaton
502 Deaderick Street, 4th Floor
Nashville, TN 37243
Chris.Eaton@tn.gov