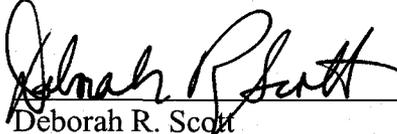




The Applicant has filed an application for approval of the cancellation of its Certificate of Convenience and Necessity. The Applicant has indicated that it is no longer in the payphone business. Therefore, Staff recommends that the application be approved without a hearing.



Deborah R. Scott
Director
Utilities Division

Date: January 19, 2001

Originator: Elena Zestrijan

Arizona Corporation Commission

DOCKETED

JAN 19 2001

DOCKETED BY	
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AZ CORP COMMISSION
DOCUMENT CONTROL

2001 JAN 19 A 9 37

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NEW APPLICATION

T-02900 ORIGINAL
ARIZONA CORPORATION COMMISSION
RECEIVED
JAN 10 2001
Director of Utilities

RECEIVED ARIZONA CORPORATION COMMISSION

2001 JAN 11 A 10:24

APPLICATION

FOR THE SALE OF ASSETS

AND/OR DOCKET NO.

T-02900A-01-0040

CANCELLATION OF CERTIFICATE OF CONVENIENCE AND NECESSITY (CC&N)

FOR

CUSTOMER OWNED PAY TELEPHONE (COPT) PROVISION

DOCKETED

Mail or deliver an Original and 10 copies of this application to:

Docket Control Center
Arizona Corporation Commission
1200 West Washington Street
Phoenix, Arizona 85007

JAN 19 2001

DOCKETED BY [Signature]

List the name, address, and telephone number of the person or entity (Applicant) that subscribed to the phone line from the local exchange company, indicate Business Name (if different than Applicant):

Ernie Clark
(Applicant's Name)
2753 E. Broadway S-101
(Applicant's Address)
Mesa AZ 85204
(Applicant's Address)

Emca Inc
(Business Name if different than Applicant's Name)
(480) 969 - 9659
(Applicant's Telephone Number)

- By checking this box, the Applicant indicates it no longer provides, or never did provide, COPT service in the State of Arizona and requests cancellation of its CC&N.
- By Checking this box, the Applicant is requesting authority to sell its COPT assets pursuant to A.R.S. Section 40-285 and to cancel its CC&N. Do not check this box if you are not selling your pay telephones.
- By checking this box, the Applicant gives up its right to notice and a hearing. Applicant has a right to a hearing and to receive notice of the hearing date in order to cancel the CC&N.
- By checking this box, the undersigned states s/he is the authorized person to make this application.

Please print your name, phone number, and sign :

Mary Clark
(Print Author's Name) (480) 354 - 3454
(Telephone Number)
Mary Clark Secretary Emca Inc
(Signature of Author and Title)

DO NOT WRITE IN THIS SPACE

STAFF RECOMMENDATIONS

See attached page 2