

ALABAMA PUBLIC SERVICE COMMISSION (APSC)

**APPLICATION FOR AMENDED CERTIFICATION TO PROVIDE
INMATE TELEPHONE SERVICE (IPS) IN THE STATE OF ALABAMA**

**This application form is to be used by currently certificated Customer Owned Coin
Operated Telephone (COCOT) providers to obtain amended authority to provide
Inmate Phone Service pursuant to APSC Docket 15957.**

NAME OF COMPANY _____

CURRENT CERTIFICATE NUMBER _____

NAME ON CURRENT CERTIFICATE (If different than company name shown
above) _____

DATE OF APPLICATION _____

COMPANY ADDRESS _____

CONTACT PERSON _____ PHONE () _____

FAX () _____ E-MAIL _____

CONTACT PERSON'S ADDRESS IF DIFFERENT FROM ADDRESS SHOWN
ABOVE _____

**I hereby request that my authority be expanded to include the ability to offer
automated-collect Inmate Phone Service (IPS) in The State of Alabama in
accordance with the rules and regulations relating to automated-collect institutional
service cited in Alabama Public Service Commission Telephone Rule T-15.1.**

Signature of Applicant _____

Date _____

Verification

STATE OF _____ COUNTY OF _____

The above- named _____
personally appeared before me this day and, being first duly sworn, says that the facts
stated in the foregoing application and any exhibits, documents, and statements thereto
attached are true as he/she verily believes.

WITNESS my hand and notarial seal, this _____ day of _____, 20____.

My Commission expires _____.

Signature of Notary Public

Typed name of Notary Public

Filing Instructions

To apply for amended certificate to provide automated-collect Inmate Phone Service in
the State of Alabama, submit the original and ten (10) copies of the completed and
verified application for filing to the Alabama Public Service Commission at the following
address:

**Secretary
Alabama Public Service Commission
P.O. Box 304260
Montgomery, Alabama
36130**

Filing Fee

Applicants must submit a check or money order for \$100.00 made payable to the
Alabama Public Service Commission