APPLICATION

FOR CERTIFICATE OF
PUBLIC CONVENIENCE AND NECESSITY
TO PROVIDE
TELECOMMUNICATIONS SERVICES
IN THE STATE OF ALABAMA
**SECTION I**

**GENERAL**

I-1 Corporate Name: ____________________________
d/b/a (if applicable): ____________________________

I-2 Street: ____________________________
City: ____________________________ State: ____________
County: ____________________________ Country: ____________
Zip: ____________

Telephone Number: ____________________________
FAX Number: ____________________________
Web Address: ____________________________

Name of employee(s) with authority to respond to Commission requests regarding tariff/regulatory matters or financial/annual reports (list information for each):

**Financial/Annual Reports**

Name: ____________________________
Official Title: ____________________________
Direct Telephone Number: ____________________________
FAX Number: ____________________________
Email: ____________________________
Tariff/Regulatory

Name: ________________________________
Official Title: __________________________
Direct Telephone Number: _______________________
FAX Number: _____________________________
Email: ___________________________________

Primary Contact

Name: ________________________________
Official Title: __________________________
Direct Telephone Number: _______________________
FAX Number: _____________________________
Email: ___________________________________

Other Contact

Name: ________________________________
Official Title: __________________________
Direct Telephone Number: _______________________
FAX Number: _____________________________
Email: ___________________________________
I-3 Types of services for which authority is requested. (i.e. Local Exchange Service, Long Distance Interexchange Service, Long Distance Resale Service, Alternate Operator Services, Prepaid Service, etc.) Please include all services which the company intends to provide. 


Indicate how service(s) will be provided (i.e. Facilities-Based, UNE-P, UNE)


I-4 Attorney (if applicable) 

Address: 

City: State: 

Zip: Telephone Number: 

I-5 Registered Agent in Alabama: 

Address: 

City: State: 

Zip: Telephone Number: 

I-6 Geographic area to be served: 
I-7  Anticipated date of service: __________________________________________

I-8  States in which applicant is authorized to provide service:

I-9  States in which applicant is currently providing service:

I-10 Mechanism by which applicant intends to bill for services:

________________________________________

________________________________________
SECTION II
ORGANIZATION

II-1 Type of Organization:

a. Individual ................................................................. ( )

b. Partnership .............................................................. ( )

c. Corporation ............................................................ ( )

d. Other (Identify) ........................................................ ( )

II-2 If a corporation:

a. Attach a copy of articles of incorporation and current bylaws.

b. Nonresident corporation - attach a copy of Certificate of Authority issued by the Secretary of State granting corporation's authority to do business in Alabama.

II-3 If a partnership:

a. Attach a copy of the partnership agreement.

b. Attach a list showing name and address of all partners.
SECTION III

FINANCIAL

III-1 Attach a current certified financial statement including balance sheet, income statement, cash flow statement, and statement of retained earnings (if applicable).

III-2 Facilities, if any:
   a. Attach statement describing means or method by which facility will be financed. (Attach copies of any agreements, commitments, or other evidence as to source and availability of capital funds.)
   b. Attach itemized estimated cost of proposed facilities.
   c. Attach itemized estimated operating expenses to be incurred in providing proposed service.

III-3 Provide a list of the number of prospective subscribers and estimated annual operating revenues.

III-4 Provide a description of any proposed or existing agreement of interconnecting service between applicant and any other telecommunications company.

III-5 Provide a description any lease or rental contract concerning any property - (real and/or personal) possessed, controlled or occupied by applicant, or by any subsidiary to which applicant owns and in which he has a controlling interest, or any parent company of which he is a subsidiary.

III-6 If a subsidiary corporation, provide a list of the parent organization and submit a copy of most recent annual report.
Attach statement that provides copy of three-year projected cash flow statement and/or market feasibility study.
SECTION IV

ENGINEERING

IV-1 Provide a statement that describes fully the facility to be provided by applicant for rendering the proposed service at each location, if applicable.

IV-2 Provide a statement that describes transmission capabilities of applicant.

IV-3 Attach a statement that provides the location of switching equipment.
SECTION V

LICENSES

V-1 Attach a copy of each certificate, license or other operating authority applicable to Alabama issued to Applicant by any federal authority.
Each applicant shall file a proposed tariff as follows:

VI-1 The tariff must provide services and descriptions, rates or charges, rules, and regulations proposed by the company for Commission approval.
(Refer to sample tariff at www.psc.state.al.us)

VI-2 The tariff must enumerate and define the classifications of services available to subscribers. Attach a copy of the proposed form of contract governing each service to be furnished by applicant to its subscribers.

VI-3 Requirements for size, form identification, and filing of tariffs:

a. All tariffs including maps shall be in loose leaf form of size eight and one-half inches by eleven inches and shall be plainly printed or reproduced on paper of good quality.

b. A margin of not less than three-fourths inch without any printing thereon, shall be allowed at the binding edge of each tariff sheet.

c. Tariff sheets are to be numbered consecutively by section, sheet, and revision number. Each sheet shall show an issue date, effective date, revision number, section number, sheet number, name of the company, name of the tariff, and title of the section in a consistent manner.
d. An official tariff filing (original plus ten copies) shall be made to the Alabama Public Service Commission.

**Overnight Delivery Address:**

Secretary  
Alabama Public Service Commission  
RSA Building  
100 N Union Street, Suite 850  
Montgomery, Alabama 36101

**NOTE:** Applicants can elect to file an electronic copy of the application and tariff. Prior to submitting the tariff, contact the Secretary’s Office at 334-242-5218 to obtain approval/authorization.

Secretary  
Alabama Public Service Commission  
P.O. Box 304260  
Montgomery, Alabama 36130-4260
SECTION VII

SUBMISSION OF APPLICATION

All of the following must be submitted before an application will be considered valid and scheduled for hearing:

VII-1 The application fee of one hundred ($100) dollars made payable to the “Alabama Public Service Commission” must be attached to original copy.¹

NOTE: Any application for certification or additional/amended certification submitted to the Commission that does not have the required fee attached will be considered an invalid/incomplete application and will not be processed further.

VII-2 An original plus ten copies of the completed application and proposed tariff must be provided.

VII-3 Application and application fee should be submitted to the address listed in Section VI – 3.d.

¹ The Communications Reform Act of 2005, CODE OF ALABAMA 1975, Section 37-2A-9b, Standards for New Entrants, states: “Every application for a Certificate of Public Convenience and Necessity by a new entrant to provide telecommunications service in this state shall be accompanied by an application fee in the amount of one hundred dollars ($100).”
SECTION VIII

REPRESENTATION

Applicant's Attorney or Representative:

Name: ____________________________________________________________
Address: ____________________________________________________________
City: ____________________________ State: ____________________________
Telephone: ____________________________________________________________

Applicant understands that the filing of this application does not constitute nor guarantee operating authority. Applicant will submit any additional materials as required by the Commission. Applicant will also file annual/financial reports and pay annual inspection and supervision fees as required under Section 37-2-41, Code of Alabama 1975.
OATH

State

County

Personally appeared before the undersigned, an officer duly authorized to administer oaths,

who first being duly sworn, deposes and says that he is ________________________
of the _____________________________________________________________

* (name of applicant) in this application, that he has read the same and knows the contents thereof, and that the statements made herein are true to the best of his knowledge and belief.

__________________________
(Signature of Affiant)

Subscribed and sworn before me, this
____________________________ day of __________, 20 __.

(SEAL)

My Commission Expires __________________________

(*) If applicant is a corporation, insert "President" or "Secretary."
    If applicant is a firm or partnership, insert "Partner."