

LAW OFFICE OF  
JAY H. LINDY  
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MEMPHIS, TENNESSEE 38103  
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September 22, 2025

Electronically Filed in TPUC Docket Room  
on September 22, 2025 at 1:09 p.m.

*Via electronic filing and Fedex*

Executive Secretary's Office  
Tennessee Public Service Commission  
502 Deaderick Street  
Nashville, TN 37219

RE: Consolidated Telecom, Inc.  
Application to Provide Inmate Operator Services  
Docket No. 25-00060  
Responses to Staff's Data Request

Dear Commission Secretary,

Enclosed for filing please find responses to Staff's Data Request, dated September 9, 2025.

Please acknowledge receipt of this filing by returning a date-stamped copy of this cover letter in the self-addressed envelope provided.

Should you have any questions regarding this filing, please do not hesitate to contact me.

Sincerely,

/s/ Jay Lindy

Jay Lindy

Enclosure

RESPONSES TO STAFF'S DATA REQUEST DATED SEPTEMBER 9, 2025

Q1: Re-submit the application with the following sections plainly marked with an "X" for the correct response.

Part I- D, E, F, G

Part II – H, Q, R, S, T

Part IV – B, C

A1: Please find attached the corrected application, submitted as Exhibit A.

Q2: Provide the name and email address of the witness that will be testifying. Provide the Pre-Filed testimony of this witness.

A2: The name of the witness is Jerome Jacobs. His email address is jjacobs@ctel.us. The Pre-Filed testimony is attached as Exhibit B.

Q3: Provide a Certificate from the Secretary of State in Tennessee.

A3: Please find attached a Certificate of Existence from the Secretary of State of Tennessee, as Exhibit C.

Q4: Provide a Pro Hac Vice for Mr. Nowalsky, Esq.

A4: We corresponded with Darlene Standley at the Commission who verified that Leon Nowalsky did not need pro hac vice admission, as Mr. Jay Lindy is the Tennessee local counsel in this matter. We asked that Mr. Nowalsky be copied on correspondence as a courtesy.

Q5: Provide a copy of the Notice provided to the ILECs.

A5: Please find a copy of the Notice to the ILECs as Exhibit D.

Q6: Provide a compliant Surety Bond or Letter of Credit pursuant to TCA §65-4-125(j)

A6: We respectfully request to submit a duplicate original Surety Bond as a Late-Filed Exhibit. Due to Lisa Foust's absence, we were unable to reach Staff in a timely manner, and are now working on obtaining a duplicate original bond to satisfy this requirement.

EXHIBIT A

- B. Describe other businesses or business transactions, if any, at the same location as the principal business address:

providing telecommunications services to correctional facilities

- C. Provide the name, business address and a chronological summary of the employment history and business experience over the preceding eight years of:

- (a) The proprietor, if the applicant is an individual;
- (b) Every member, if the applicant is a partnership;
- (c) Each Executive Officer, Director and each Key Stockholder if the applicant is a joint stock association or a corporation. (Note: If the applicant is a publicly traded corporation or a subsidiary of such a corporation it does not need to provide this information.)
- (d) Any person in a position to exercise control over or direction of, the business of the applicant, regardless of the form of organization of the applicant.

Information to be included:

NAME TITLE  
BUSINESS ADDRESS PHONE NO.  
EMPLOYMENT HISTORY (with details of duties/responsibilities for each position held)

**Provide the above requested information on separate attachments.**

- D. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust) been associated with a business whose authority to transact business was denied, revoked or suspended by a state or federal regulatory or law enforcement entity?

Yes  No If yes, please explain fully.

- E. Has the Tennessee Regulatory Authority, or any other agency of the State of Tennessee, any federal agency or any agency of any other state ever initiated a regulatory action or order against the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust)?

Yes  No If yes, please explain fully.

- (1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust), been enjoined or restrained by order by any court or state or federal regulatory or law enforcement entity from engaging in any conduct or practice related to the telecommunications business?

Yes  No If yes, please explain fully.

- F. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, LLC members, directors, officers, five percent (5%) more shareholders or beneficiaries (of a trust) been associated with a business who has ceased providing telecommunications services in any state?

Yes  No If yes, please explain fully and describe the circumstances. (Use additional pages if necessary)

G. Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been convicted of any crime or crimes, or charged in court with any fraudulent or dishonest acts in any transaction of any kind, or confined in any penal institution? If so, list such persons, give details, state results and final outcome. (Use additional pages if necessary)

(1) Has the applicant or any of its parent companies, subsidiaries, affiliates, owners, partners, L.L.C. members, directors, officers, five percent (5%) or more shareholders or beneficiaries (of a trust) been indicted, convicted, pled guilty or pled nolo contendere to a felony in Tennessee or elsewhere?  
 YES  NO If yes, please explain fully.

H. Name and telephone number of contact person authorized to respond to Authority inquiries regarding company operations Monday through Friday.

Name  Phone No.  Fax No.  
(800)  e-mail Address

(1) Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.

Name  Phone No.  Fax No.  
(800)  e-mail Address

I. List a toll-free telephone number and mailing address that consumers can call or write to report service problems and/or request refunds or adjustments.

PHONE NUMBER  ALTERNATE PHONE NUMBER  
 ADDRESS CITY ST ZIPCODE

(J) Provide the name and address of the registered agent for service of process:

(K) Identify all authorized agents in the state, if any by name, address, business and home phone numbers and any other businesses conducted by the agent at the same location: (use additional sheets if necessary)

Part II:

A. Check the type of telecommunication services you plan to provide in Tennessee.

Resell Interexchange long distance services  
 Operator Services  
 Resell local services  
 Other (describe)

B. If providing operator services, list company name, address and contact person for all reseller carriers you serve in Tennessee. Provide the above information on Appendix I.

C. List the state(s) where the applicant, its parent company, and all affiliates is authorized to operate in at this time. For each such state, describe applicant's current activities along with a history of operations there. (Use additional pages if necessary.)

Texas - provision of inmate operator services to correctional facilities

For the above states, list the number and types of complaint(s) filed against applicant, and the complaint(s)' current status. Provide this information on a separate attachment, if necessary.

If applicant has affiliate(s) or parent company, or constituency corporations, engaged in providing telecommunications services, or operating under any trade name, assumed name or fictitious name used by the above, provide the above requested information for all as well as for the applicant. Provide this information on a separate attachment, if necessary.

D. List any states that the applicant or any affiliate, parent company, or constituency corporation operating under any trade name, assumed name, or fictitious name, has been denied authority to provide service. (Use additional pages if necessary)

none

E. Areas in Tennessee to be served.

statewide

F. What type of customers will the applicant serve?

a. Business

b. Residential

c. Aggregators

(e.g. Hotels, Payphones)

d. Other (specify)

G. Does the applicant allow a property imposed fee (PIF) to be added to the price of intrastate telephone calls over its network? If yes, specify amount.

H. Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers' price for similar services? Yes  No

I. Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II<sup>1</sup>.

J. What is the applicant's 10XXX or 800 access code, if applicable?

K. Does the applicant now have or plan to have any telecommunication's facilities (e.g. switches, fiber lines) in Tennessee?

no

<sup>1</sup>Applicant is required to fill out an Informational Tariff form. Failure to fill out this form will cause the applicant's request to be rejected.

L. Whose facility-based network(s) will the applicant be reselling?  


M. Will the applicant be utilizing the local telephone company's billing system or billing customers directly?  

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N. Describe briefly how the applicant plans to market their services in Tennessee?  
The company utilizes mail advertising materials and also uses direct sales for contacting the correctional facilities.  

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O. If independent telemarketers are to be used, list the name, contact person, address phone number and federal taxpayer ID for each company.  
not applicable  

COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE

COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE

COMPANY NAME	CONTACT	ADDRESS	CITY	ST	ZIP	PHONE

P. Describe the methods and procedures by which the applicant will use to switch a consumer's preferred interexchange service, and to prevent unauthorized switching of a consumer's interexchange service. Use additional pages if necessary. If you have written procedures or company guidelines, attach copies.  

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Q. Applicant has the ability and agrees to honor the form of call blocking that the consumer has subscribed to with their local telephone company. Yes  No

R. Applicant gives permission to the local telephone company to provide the Authority a periodic sample of the reseller's intrastate toll calls. The purpose of this analysis is to audit the reseller's rates to assure they are at or below the dominant carrier's tariffed rates. Yes  No

S. Is the Applicant aware of the requirement to insure that any telephone call made between two points in the same county in Tennessee shall be classified as toll-free and not billed to any customer pursuant to Tennessee Code Annotated § 65-21-114? Yes  No

T. Is the Applicant aware of the TAR Code data base maintained by BellSouth, its use to insure compliance with T.C.A. § 65-21-114 and the procedures used to enter telephone numbers in that data base? Yes  No

U. How does the Applicant intend to comply with T.C.A. § 65-21-114? In your response, please explain technically, what procedures the Applicant will use to insure it will not bill for any county wide calls in Tennessee. Use additional pages if necessary.  


<sup>1</sup>A copy of a bill is required if the applicant is going to bill the customer directly.

General Attach a copy of the partnership agreement along with any amendments.

Limited Attach a copy of the certificate of limited partnership and the partnership agreement along with any amendments.

Other (Explain on separate sheet)

All of the above will be required to submit a valid business license.

- (a) Identify the place and date of the applicant's qualifications to provide telecommunications services in this state.
- (b) List the full name, social security number and address of the owners, if a sole proprietorship, or all partners identifying the percentage of ownership:  
**ATTACH ADDITIONAL PAGES AS NECESSARY**

C. Number of employees:

Employer Identification Number (E.I.N.)

Part IV: Financial Information

A. Address where business records are kept:

Irving	TX	75063	(877) 583-9683
CITY	STATE	ZIP CODE	PHONE NUMBER

B. Attach a copy of the applicant's most recent unconsolidated and consolidated audited financial statements for the immediately preceding three-year period. Provide in detail the applicant's financial condition, including balance sheet and income statement, or a copy of IRS form 1120 or 1065 filed by your business for the previous year. Attach, if available, a copy of your company's 10K and/or stockholder reports.

(1) Fiscal year end: Month  Day

(2) Date of most recent audited, unconsolidated financial statement of Applicant:

(3) If applicable, name and address of independent certified public accountant:

(4) Period covered by financial statement attached:

C. Does the applicant currently have an internal auditor and/or internal audit program?

If so, Name of internal auditor

D. If applicable, provide a history of applicant's material litigation and criminal convictions for the ten-year period prior to the date this application is made. Material litigation is defined as any litigation that, according to generally accepted accounting principles, is deemed significant to a person's financial health and would be required to be referenced in annual audited financial statements, reports to shareholders or similar documents.

EXHIBIT B



**Q: Are all statements in Consolidated's application true and correct to the best of your knowledge, information and belief?**

A: Yes.

**Q: Please describe the current corporate structure of Applicant.**

A: Consolidated is a Texas for-profit business corporation.

**Q: Does Applicant possess the requisite managerial, financial, and technical abilities to provide the services for which it has applied for authority?**

A: Yes. Consolidated has the managerial, technical and financial qualifications necessary to provide the proposed services in Tennessee.

**Q: Please describe Consolidated's financial qualifications.**

A: Consolidated has sufficient financial resources to initiate and maintain the services and related operations in Tennessee as proposed in this Application. Financial information demonstrating the financial resources of Consolidated is provided as Confidential Exhibit J.

**Q: Please describe Consolidated's managerial and technical qualifications.**

A: Consolidated has the managerial qualifications necessary to provide the proposed services in Tennessee. Applicant is managed by a well-qualified and highly skilled team with substantial expertise and experience in the telecommunications industry as evidenced in the biographies included with the Application as Exhibit B.

**Q: What services will Consolidated offer?**

A: Inmate Operator Services to jails and confinement facilities in Tennessee.

**Q: Will Consolidated offer service to all consumers within its service area?**

A: No. Consolidated will provide only inmate operator services in the State of Tennessee.

**Q: Does Consolidated plan to offer local exchange telecommunications services in areas served by any incumbent local exchange telephone company with fewer than 100,000 total access lines?**

A: No. The company will not offer local exchange services.

**Q: Will the granting of a Certificate to Consolidated serve the public interest?**

A: Yes. Granting this application will promote the public interest by increasing the level of competition in the Tennessee inmate operator services market. The competition will ultimately compel all inmate operator service providers to operate more efficiently and to introduce newer technologies..

**Q: Does Consolidated intend to comply with all TPUC rules, statutes, and orders pertaining to the provision of telecommunications services in Tennessee, including those for disconnection and reconnection of service?**

A: The company intends to comply with the TPUC rules, statues, and orders pertaining to the provision of inmate telecommunications services in Tennessee.

**Q: Has any state ever denied Consolidated or one of its affiliates authorization to provide intrastate service?**

A: No. Consolidated, has never been denied authority to provide telecommunications services in any state or jurisdiction.

**Q: Has any state ever revoked the certification of Consolidated or one of its affiliates?**

A: No. Consolidated, has never had its authority to provide telecommunications revoked in any state.

**Q: Has Consolidated or one of its affiliates ever been investigated or sanctioned by any regulatory authority for service or billing irregularities?**

A: No. Consolidated has never been the subject of investigation nor sanctioned by any regulatory authority for service or billing irregularities

**Q: Who is knowledgeable about Consolidated's operations and will serve as its regulatory and customer service contact?**

A: I, Jerome Jacobs, am knowledgeable about Consolidated's operations and will also serve as its regulatory and customer service contact.

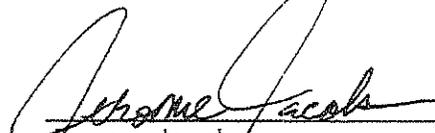
**Q: Please explain in detail Consolidated's proposed procedures for responding to information requests from the TPUC and its staff.**

A: Information requests related to this Application should be directed to our counsel set forth in the Application, with a copy to me. A response will be provided after the request has been reviewed by me and discussed with counsel. We will prepare and ensure the response is filed promptly by the deadline, all other information requests will be responded to by myself.

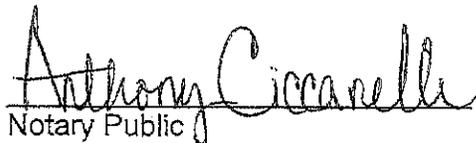
**Q: Does this conclude your testimony?**

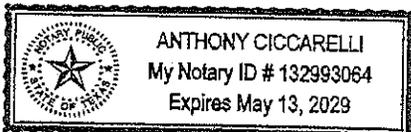
A: Yes.

I attest the foregoing testimony is true and correct to the best of my knowledge, information and belief.

  
Jerome Jacobs  
Vice President  
Consolidated Telecom, Inc.

Respectfully submitted this Sept. day of 18th, 2025.

  
Notary Public

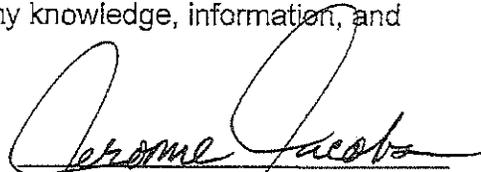


County of Dallas

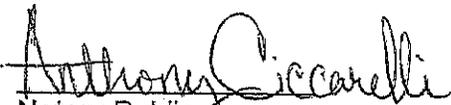
State of Texas

VERIFICATION

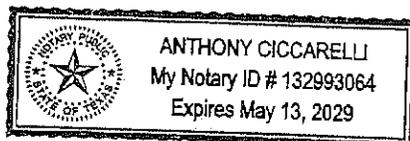
I, Jerome Jacobs, state that I am Vice President of Consolidated Telecom, Inc., the Applicant in this Application, that I am authorized to make this Verification on behalf of the Company, that the foregoing was prepared under my direction and supervision, and that the contents are true and correct to the best of my knowledge, information, and belief.

  
Jerome Jacobs  
Vice President  
Consolidated Telecom, Inc.

Sworn to and subscribed before me this Sept. day of 18th, 2025.

  
Notary Public

My commission expires 5/13/2029



## EXHIBIT C



Division of Business and Charitable Organizations  
Department of State  
State of Tennessee  
312 Rosa L. Parks Avenue, 6th Floor  
Nashville, Tennessee 37243  
Phone: 615-741-2286  
sos.tn.gov/

**Tre Hargett**  
Secretary of State

BECKY HEGGELUND  
1420 VETERANS MEMORIAL BLVD.  
METAIRIE, LA 70005, USA

09/22/2025

**Request Type: Certificate of Existence/Authorization**

Issuance Date: 09/22/2025

Request #: C2025080856

**Document Receipt**

Order Number: C2025080856

Verification #: 57FD02BE

Receipt #: 2025-671071

Filing Fee: \$20.00

Payment: Credit Card - 3906458780

\$20.00

Entity Name: CONSOLIDATED TELECOM, INC.

SOS Control #: 001435765

Initial Filing Date: 06/13/2023

Entity Type: Foreign For-profit Corporation

Formation Locale: TEXAS

Status: Active

Duration Term: Perpetual

Fiscal Year Close: December

Annual Report Due: 04/01/2026

Business County: (No County on Record)

Obligated Member Entity: No

**CERTIFICATE OF AUTHORIZATION**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**CONSOLIDATED TELECOM, INC.**

- \* a Corporation formed in the jurisdiction set forth above, is authorized to transact business in this State;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed an Application for Certificate of Withdrawal.

Tre Hargett  
Secretary of State

Verification #: 57FD02BE

EXHIBIT D

BEFORE THE  
TENNESSEE PUBLIC UTILITY COMMISSION  
NASHVILLE, TENNESSEE

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In the Matter of the Application of )  
 )  
Consolidated Telecom, Inc. )  
 )  
For a Certificate to Provide Inmate Operator )  
Services in the State of Tennessee )  
Tennessee )

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NOTICE OF FILING

TO: ALL INCUMBENT LOCAL EXCHANGE CARRIERS (ILECS)

PLEASE TAKE NOTICE, that in accordance with the Tennessee Public Utility Commission Rules for the Provision of Competitive Intrastate Telecommunications Services, you are hereby given notice that on 8/11, 2025, Consolidated Telecom, Inc. filed an Application for a Certificate to Provide Inmate Operator Services in the State of Tennessee.

This 22nd day of Sept, 2025.

By: *B. Heggelund*

## CERTIFICATE OF SERVICE

The undersigned hereby certifies that a copy of the Notice of Filing of the Application of Consolidated Telecom, Inc. for a Certificate of Convenience and Necessity to provide Inmate Operator Services was service upon the following parties of record by depositing a copy of same in the United States Mail, First Class, Postage Prepaid, to their last known address as follows:

Ardmore Telephone Company  
P.O. Box 549  
517 Ardmore Avenue  
Ardmore, TN 38449

BellSouth Telecommunications, LLC  
333 Commerce Street, Suite 2106  
Nashville, TN 373201-3300

Brightspeed of Appalachia, LLC  
P.O. Box 1330  
Fayetteville, NC 28302

Brightspeed of East Tennessee, LLC  
P.O. Box 1330  
Fayetteville, NC 28302

Brightspeed of Southern Tennessee, LLC  
P.O. Box 1330  
Fayetteville, NC 28302

BrightSpeed of Western Tennessee, LLC  
P.O. Box 1330  
Fayetteville, NC 28302

Crockett Telephone Company  
P.O. Box 24207  
Friendship, TN 38034

Frontier Communications of Tennessee  
300 Bland Street  
Bluefield, WV 24701

Humphreys County Telephone Company  
10200 Upper Ridge Way  
2203 Long Street  
New Johnsonville, TN 37134-0552

Loretto Telephone Company  
P.O. Box 130  
Loretto, TN 38469

Millington Telephone Company, LLC  
4880 Navy Road  
Millington, TN 38083

Peoples Telephone Company  
P.O. Box 310  
Erin, TN 37061

Tellico Telephone Company, Inc.  
P.O. Box 9  
102 Spence Street  
New Johnsonville, TN 37385-0009

United Telephone Company, Inc.  
P.O. Box 38  
120 Taylor Street  
Chapel Hill, TN 37034

West Tennessee Telephone Company, Inc.  
P.O. Box 10  
244 E. Main Street  
Bradford, TN 38316