#### TENNESSEE PUBLIC SERVICE COMMISSION

460 JAMES ROBERTSON PARKWAY NASHVILLE, TENNESSEE 37243-0505

KEITH BISSELL, CHAIRMAN STEVE HEWLETT, COMMISSIONER SARA KYLE, COMMISSIONER



Company ID: 00118831 Georgia Public Telephone Co., Inc. 303 Walnutwood Trail Roswell, GA 30075

BEFORE THE TENNESSEE PUBLIC SERVICE COMMISSION Nashville, Tennessee May 2, 1996

IN RE: CASE NUMBER: 95-03983

Application for Authority for Operator Services and/or Resell Interexchange (Long Distance) Telecommunications Service and/or Telecommunications Operator Services in Tennessee Pursuant to Rule 1220-4-2-.57.
---ORDER---

This matter is before the Tennessee Public Service Commission upon the application of the above-mentioned company for certification as a long distance/interexchange reseller or telecommunication operator service provider in Tennessee. The Commission considered this application at its regularly scheduled Commission Conference held on April 30, 1996 and concluded that the applicant has met all the requirements for certification and should be authorized to provide the resell of interexchange telecommunications service and/or an operator service on an intrastate basis.

#### IT IS THEREFORE ORDERED:

- 1. That the above-mentioned company is issued a Certificate of Convenience and Necessity as an interexchange telecommuications reseller and/or an operator service provider for state-wide service in Tennessee as specified in its application on file with the Commission.
- 2. That said company shall comply with all applicable Commission rules and regulations.
- 3. That this order shall be retained as proof of certification with this Commission, and may be used to obtain appropriately tariffed access service arr' billing arrangements from Commission authorized telecommuications service providers.
- 4. That any party agrieved with the Commission's decision in this matter may file a Petition for Reconsideration with the Commission within ten (10) days from and after the date of this Order.

5. That any Party aggrieved with the Commission's decision in this matter has the right of judicial review by filing a petition with the Tennessee Court of Appeals, Middle Section within sixty (60) days from and after the date of this Order.

Commission

Executive Director



## STATE OF TENNESSEE DEPARTMENT OF REVENUE ANDREW JACKSON STATE OFFICE BUILDING NASHVILLE, TENNESSEE 37242

3-000253208-000-8

2:

GEORGIA PUBLIC TELEPHONE COMPANY, INC.
303 WALNUTWOOD TRAIL
ROSWELL GA 30075

In order to update your records with the Tennessee Department of Revenue, please return this form with the following information:

Federal Employer's Identification Number

### (FEIN) 58-2134394

If you have any questions you may call our toll-free number 1-800-342-1003. Nashville area and out-of-state call (615) 741-2594. Our office hours are between 8:00 a.m. to 4:30 p.m. CST, Monday through Friday.

Taxpayer Services Division
Registration Operations
3rd Floor
Andrew Jackson State Office Building

Secretary of State Corporations Section James K. Polk Building, Suite 1800 Nashville, Tennessee 37243-0306

DATE: 12/04/95 REQUEST NUMBER: 3081-1550 TELEPHONE CONTACT: (615) 741-0537 FILE DATE/TIME: 12/04/95 1016 EFFECTIVE DATE/TIME: 12/04/95 1016 CONTROL NUMBER: 0303696

TO: TSIO P.O. BOX 120598 NASHVILLE, TN 37212

RE: GEORGIA PUBLIC TELEPHONE COMPANY, INC. APPLICATION FOR CERTIFICATE OF AUTHORITY - FOR PROFIT

WELCOME TO THE STATE OF TENNESSEE. THE ATTACHED CERTIFICATE OF AUTHORITY HAS BEEN FILED WITH AN EFFECTIVE DATE AS INDICATED ABOVE.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THE SECRETARY OF STATE ON OR BEFORE THE FIRST DATE OF THE FOURTH MONTH FOLLOWING THE CLOSE OF THE CORPORATION'S FISCAL YEAR. PLEASE PROVIDE THIS OFFICE WITH WRITTEN NOTIFICATION OF THE CORPORATION'S FISCAL YEAR. THIS OFFICE WILL MAIL THE REPORT DURING THE LAST MONTH OF SAID FISCAL YEAR TO THE CORPORATION AT THE ADDRESS OF ITS PRINCIPAL OFFICE OR TO A MAILING ADDRESS PROVIDED TO THIS OFFICE IN WRITING. FAILURE TO FILE THIS REPORT OR TO MAINTAIN A REGISTERED AGENT AND OFFICE WILL SUBJECT THE CORPORATION TO ADMINISTRATIVE REVOCATION OF ITS CERTIFICATE OF AUTHORITY.

WHEN CORRESPONDING WITH THIS OFFICE OR SUBMITTING DOCUMENTS FOR FILING, PLEASE REFER TO THE CORPORATION CONTROL NUMBER GIVEN ABOVE.

FOR: APPLICATION FOR CERTIFICATE OF AUTHORITY - FOR PROFIT

FROM:
PRENTICE HALL LEGAL & FIN (DALLAS, TX)
400 N. ST. PAUL
SUITE #410

DALLAS, TX 75201-0000

ON DATE: 12/04/95

F**EE**S \$300.00

\$300.00

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$600.00

RECEIPT NUMBER: 00001873783



RILEY C. DARNELL SECRETARY OF STATE

#### **TENNESSEE PUBLIC SERVICE COMMISSION**

**460 JAMES ROBERTSON PARKWAY** NASHVILLE, TENNESSEE 37243-0505

KEITH BISSELL, CHAIRMAN STEVE HEWLETT, COMMISSIONER SARA KYLE, COMMISSIONER





# APPLICATION FOR CERTIFICATE TO PROVIDE OPERATOR SERVICES AND/OR RESELL INTEREXCHANGE TELECOMMUNICATION SERVICES IN TENNESSEE [RULE 1220-4-2-.57] CONSUMER CE INTERESSEE TENNESSEE TENNESSEE TENNESSEE TO PROVIDE OPERATOR SERVICES AND/OR RESELL INTEREXCHANGE TELECOMMUNICATION SERVICES IN TENNESSEE [C SERVICE OF TENNESSEE] [RULE 1220-4-2-.57]

	Name of App Address State GA	JUJ WHENING	OD THAT	LOSWE	on pany inc.		
3.	Owner, Partn	ers, or Corporate Office	er				
	NAME	ADDRESS	CITY	STATE	ZIP CODE		
	- KURAC	303 WALNUTUMO TR.	GOSWELL	67	3007V		
JEAN	Korse	303 WALNUTUKOSTR.	Roswers	99	30071		
D.	Mark Hw Name List a toll-free	telephone number that	1392 - 278/ nnessee Phone No. t consumers can ca		ンチ) <u>233 - フク3 o</u> Fax No. t service problems		
	Check the typ <u>✓</u> Resell Int <u>✓</u> Operator	st refunds or adjustment be of telecommunication erexchange long distant Services escribe below)	n services you plan ce services	to provide	e in Tennessee.		
F.		perator services, list co ers you serve in Tennes					
	List the state(s) you are authorized to operate in at this time. New York & LA.  (To be filled out by PSC)						
G.							

H.	List any states that you have been denied authority to provide service.
I.	Areas in Tennessee to be served.  Enrice State
J. V	what type of customers will the company serve?  a. Business  b. Residential  c. Aggregators  (e.g. Hotels, Payphones)  d. Other (specify)  DEBIT CARD USES
	Do you allow a property imposed fee (PIF) to be added to the price of intrastate telephone calls over your network? If yes, specify amount.
L. A	arriers prices for intrastate services plus any PIF equal to or less than the dominant arriers price for similar services? YesNo
	Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II1.
· N. V	What is the applicant's 10XXX or 800 access code?
	Does the applicant now have or plan to have any telecommunication's facilities e.g. switches, fiber lines) in Tennessee?
	What facility-based network will the applicant be reselling? MCI, WITEL,
	Will the applicant be utilizing the local telephone company's billing system or billing customers direct <sup>2</sup> ? <u>LEC Billing +Rought Thirds Party" ZPOI"</u>
ʻiṛ ≤	Describe briefly how the applicant plans to market their services in Tennessee? If an independent telemarketer is going to be used, state company name and address.  Lude Je user Sales Acents - No Telemarketers  will be uses.
	Describe the procedures the applicant will use to switch a consumer's preferred interexchange service. Company will obtain A FIGNED LETTER of HOENCY Explaining the Switch COST AND Who the New Carpier will be.

<sup>&</sup>lt;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.

<sup>2</sup>A copy of a bill is required if the applicant is going to bill the customer direct.

Т.	Applicant has the ability and agrees to honor the form of call blocking that the consumer has subscribed to with their local telephone company. YesNo
U.	Applicant gives permission to the local telephone company to provide the Commission 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
<u>Pa</u>	rt II: Organization Structure
A.	Type of Organization
	IndividualCorporation
	PartnershipOther (Explain on separate sheet)
В.	<ul> <li>If partnership and/or Non-resident</li> <li>(1) Attach a copy of Articles of Incorporation and current by-laws.</li> <li>(2) Attach a copy of Certification of Authority issued by Tennessee Secretary of State showing corporation's authority to engage in business in Tennessee.</li> </ul>
<u>Pa</u>	rt III: Financial Information
	Association and the social expression of social she configurate financial condition

A. Attach a current financial statement showing 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.

#### Part IV: Display Card

Attach a copy of the display card to be placed on the aggregators telephone which shows what operator services are to be provided. The card must contain all required information listed in the attached Rule (1220-4-2-.57, B)<sup>3</sup>, which includes a toll-free number consumers can call for service problems and refunds.

<sup>&</sup>lt;sup>3</sup>It is the responsibility of the reseller or operator service provider to assure that the appropriate display card is affixed to the aggregates telephones.

#### Part V: Rule Compliance Agreement

- A. The Interexchange Reseller or Operator Service Provider applicant, hereby, affirms the following:
- Has received, read, and understands the Tennessee Public Service Commission's (TPSC) Interexchange Reseller Rules and Regulations, (Appendix III)
- Understands the penalties for non-compliance, and all associated fees to provide such service.
- Will comply with the TPSC Interexchange Reseller Rules and all other applicable Commission Rules and state laws, including T.C.A. Section 65-5-206 (Appendix IV),
- That all information provided in the attached registration document is true to the best of my knowledge.

Company Name

Date

Company Official

Title

Subscribed and swom before me this 15 day

Notary Public

**fotary Public, Cobb County, Georgia My Commission Expires Feb. 12, 1999** 

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