

460 JAMES ROBERTSON PARKWAY NASHVILLE, TENNESSEE 37243-0505

H. LYNN GREER, JR., CHAIRMAN SARA KYLE, DIRECTOR MELVIN J. MALONE, DIRECTOR



DAVID WADDELL, EXECUTIVE SECRETARY

Company ID: 00122030 IDT Corporation 294 State St. Hackensack, NJ 07601

BEFORE THE TENNESSEE REGULATORY AUTHORITY
Nashville, Tennessee April 17, 1997

IN RE: CASE NUMBER: 96-00975

Application for Authority to Provide Operator Services and/or Resell Telecommunications Services in Tennessee Pursuant to Rule 1220-4-2-.57.

--ORDER--

This matter is before the Tennessee Regulatory Authority upon the application of the above-mentioned company for certification as a reseller of telecommunications / operator service provider in Tennessee. The TRA considered this application at a Conference held on April 15, 1997 and concluded that the applicant has met all the requirements for certification and should be authorized to provide operator services and/or resell telecommunications services on an intrastate basis.

#### IT IS THEREFORE ORDERED:

- 1. That the above-mentioned company is issued a Certificate of Convenience and Necessity as an operator service provider and/or reseller of telecommunications services for state-wide service in Tennessee as specified in its application on file with the Authority.
- 2. That said company shall comply with all applicable state laws and TRA rules and regulations.
- 3. That this order shall be retained as proof of certification with this Authority, and may be used to obtain appropriately tariffed service and billing arrangements from Authority authorized telecommunications service providers.

ATTEST:

Executive Secretary

Director

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Director

#### TENNESSEE PUBLIC SERVICE COMMISSION

460 JAMES ROBERTSON PARKWAY NASHVILLE, TENNESSEE 37243-0505

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

PAUL ALLEN, EXECUTIVE DIRECTOR





# APPLICATION FOR CERTIFICATE TO PROVIDE OPERATOR SERVICES AND/OR RESELL INTEREXCHANGE TELECOMMUNICATION SERVICES IN TENNESSEE [RULE 1220-4-2-57]

	Down 4	SECTION A							
	Part 1: General Information								
	A.	Name of Appli	cantIDT Ameri	.ca, Corp.					
		Address 294 State Street, Hackensack,							
		State NJ Zip Code 07601 Phone No. (201) 928-1000							
	в.	Owner, Partners, or Corporate Officer							
		NAME	ADDRESS	CITY	STATE	ZIP CODE			
	See A	Attachment							
		d Jonas	294 State St.	Hackensack	NJ	07601			
		Mason .	294 State St.	<u>Hackensack</u>	NJ	07601			
Treas.	Howar	d Jonas	294 State St.	Hackensack	_NJ	07601			
•	D.	Lance J.M. S Name		0) 698 - 9200 nnessee Phone No.		770) 698 - 9202 Fax No.			
	E.	List a toll-free telephone number that consumers can call to report service problems and/or request refunds or adjustments. 800–221–0756  Check the type of telecommunication services you plan to provide in Tennessee.  X Resell Interexchange long distance services  Operator Services  Other (describe below)							
	F.	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.  List the state(s) you are authorized to operate in at this time. All states except.  Maine. Tennessee, Alaska, Rhode Island, New Mexico, Wyoming, and North Carolina  (To be filled out by PSO 275							
					Compan Date App Evaluato	proved			

Mail the completed application and a check for \$50.00 to: Tennessee Public Service Commission, P.O. Box 3412. Nashville, TN 37219-0412. Should you have any questions, call (615)741-3939.

H.	List any states that you are been denied authority to provide wrice.  _None
I.	Areas in Tennessee to be served.  The entire state
J.	What type of customers will the company serve?  a. Businessx  b. Residential_x  c. Aggregators  (e.g. Hotels, Payphones)  d. Other (specify)
K.	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
	Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers price for similar services? Yes_x_No
М.	Describe the type of services and price that the applicant will be offering in Tennessee on the Informational Tariff Form found in Appendix II.
· <b>N.</b>	What is the applicant's 10XXX or 800 access code? 10555
	Does the applicant now have or plan to have any telecommunication's facilities (e.g. switches, fiber lines) in Tennessee?No
P.	What facility-based network will the applicant be reselling?
Q.	Will the applicant be utilizing the local telephone company's billing system or billing customers direct <sup>2</sup> ?  Direct Billing
T	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. The company will market its services in the State of Tennessee through its
•	ales department. No sales office will be opened in the State of Tennessee.  ne company will follow leads from its existing customers.
S.	Describe the procedures the applicant will use to switch a consumer's preferred interexchange service. All customers are required to execute a letter of agency authorizing applicant to switch service.

<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.

Τ.	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_xNo				
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 _X_ No				
Part II: Organization Structure					
A.	Type of Organization				
	Individual X Corporation				
	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>				

#### Part III: Financial Information

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.

IDT America, Corp.

Company Name

Date

Company Officia

Subscribed and swom before me this 2 4 day

of M24, 1996

Notary Public

Notary Public, Cobb County, Georgia My Commission Expires On January 18th, 2000

seal

#### Lance J.M. Steinhart

Attorney At Law 6455 East Johns Crossing Suite 285 Duluth, Georgia 30155

Also Admitted in New York and Maryland

Telephone: (770) 232-9200

Facsimile: (770) 232-9208

April 2, 1997

#### VIA OVERNIGHT MAIL

Mr. Scott Trout
Tennessee Public Service Commission
460 James Robertson Parkway
Second Floor
Nashville, TN 32743-0505

Re: IDT America Corp.

Public Service Commission ("PSC") Docket No. 96-0975

Dear Scott:

Pursuant to our telephone conversation this morning, Applicant's name should be changed to IDT Corporation, a Delaware corporation. IDT America, Corp. is a wholly-owned subsidiary of IDT Corporation. IDT Corporation's address and telephone number are the same as IDT America, Corp. Please note that my address, telephone number and fax number have changed as indicated above. The executive officers of IDT Corporation are set forth on Exhibit A.

Finally, I have attached an original and one (1) copy of IDT Corporation's tariff, to replace the tariff previously filed.

Please note that IDT Corporation was issued a certificate of authority by the secretary of state on March 31, 1997. The SOS control number is 0328193. We will fax you a copy of the certificate upon receipt.

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self addressed, postage prepaid envelope.

If you have any questions or if I may provide you with any additional information, please do not hesitate to contact me.

Respectfully submitted,

Lance J.M. Steinhart

Attorney for IDT Corporation

Enclosures

cc: Mr. James Courter

#### EXHIBIT A - EXECUTIVE OFFICERS

Howard S. Jonas, CEO/Treasurer/Director 294 State Street Hackensack, New Jersey 07601

Mark E. Knoller, Vice President/Director 294 State Street Hackensack, New Jersey 07601

Howard S. Balter, COO/Director 294 State Street Hackensack, New Jersey 07601

James A. Courter, President/Director 294 State Street Hackensack, New Jersey 07601

Stephen R. Brown, CFO/Director 294 State Street Hackensack, New Jersey 07601

Joyce J. Mason, Secretary/Director 294 State Street Hackensack, New Jersey 07601

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

DATE: 03/31/97
REQUEST NUMBER: 3315-3191
TELEPHONE CONTACT: (615) 741-0537
FILE DATE/TIME: 03/31/97 1216
EFFECTIVE DATE/TIME: 03/31/97 1216
CONTROL NUMBER: 0328193

LANCE STEINBERT 6455 EAST JOHNS CROSSING DULUTH, GA 30155

ÖDT CORPOARTION APPLICATION FOR CERTIF AUTHORITY - FOR PROFIT CERTIFICATE OF

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

ON DATE: 03/31/97

FROM: IDT CORP. 294 STATE ST.

\$300.00 RECEIVED:

\$300.00

TOTAL PAYMENT RECEIVED:

\$600.00

HACKENSACK, NJ 07601-0000

RECEIPT NUMBER: 00002100380 ACCOUNT NUMBER: 00257585



RILEY C. DARNELL SECRETARY OF STATE

CARCIARY CHAPTER

LANCE STEINHART

PECCLIFED STATE

RECCLIFED OF STATE

HHR 31 PH 12: 16	IDT Corp	oration	
o the Secretary of State of the	State of Tennessee:		
CRETARY OF STAIL	Familian 48 26 103 - 64	ne Tennessee Business Corporation	And the condition of the
provision hereby applies for a certi	Section 48-23-103 of the ficate of authority to t	ne Tennessee Business Corporation ransaci business in the State of Ter	Act, the undersigned cor-
ose sets forth:	-		
. The name of the corporation	s IDT Corp	oration	
		:	
different, the name under whi	ch the certificate of au	thority is to be obtained is	
Delaware IDT Corpor	ation		
ion for profit if its name does no	comply with the requi ficate of authority und	may not issue a certificate of authorements of Section 48-14-101 of the er an assumed corporate name, an	Tennessee Business Cor-
. The state or country under wh	nose law it is incorpora	nted is Delaware	
. The date of its incorporation is f duration, if other than perpet		(must be month, day,	and year), and the period
. The complete street address (i	ncluding zip code) of i	ts principal office is	
294 State Street,	Hackensack, N	J 07601	
treet	City	State/Country	Zip Code
. The complete street address (i	ncluding the county as	nd the zip code) of its registered o	ffice in this state is
530 Gay Street, K			tu sind black 13
treet	City/State	County	Zip Code
<b>7</b>	•	332,113	alp cour
The name of its registered age	ent at that office is		
C T Corporation S	ystem		
Please see attach	ed		
The names and complete busine eparate sheet if necessary.)	ness addresses (includir	ng zip code) of its current board o	f directors are: (Attach
Please see attach	eð.		
Trease see accaem			
3. The corporation is a corporat	ian for avolit		
-	•	•	
). If the document is not to be	effective upon filing by	y the Secretary of State, the delay	ed effective date/time is
February 14	97	(date), (time)	).
[NOTE: A delayed effective date so of State.]	hall not be later than th	e 90th day after the date this docum	ent is filed by the Secretary
NOTE: This application must b	e accompanied by a ce	rtificate of existence (or a docume	nt of similar import) duly
authenticated by the Secretary of	State or other official	having custody of corporate reco	rds in the state or country
under whose law it is incorporate the application is filed in this st		not bear a date of more than one (	1) month phor to the date
February 14,1997	)	INT CORPORAT	Noi
Signature Date		TOT CORPORAT	
cfO		Alexander of the second	_
Signer's Capacity		Signature	
		STEPHEN R. BF	SOM V
SS-4431 (Rev. 7/93)		Name (typed or printed)	1.1 YV3
		0 232 8208 TYNCE	

LANCE STEINHART

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

DATE: 03/31/97 REQUEST NUMBER: 3315-3195 TELEPHONE CONTACT: (615) 741-0537 FILE DATE/TIME: 03/31/97 1216 EFFECTIVE DATE/TIME: CONTROL NUMBER: 0328193

TO: LANCE STEINBERT 6455 EAST JOHNS CROSSING DULUTH, GA 30155

RE: DELAWARE IDT CORPORATION ASSUMED NAME REGISTRATION

THIS WILL ACKNOWLEDGE THE FILING OF THE ATTACHED ASSUMED NAME REGISTRATION FOR A FIVE YEAR PERIOD BEGINNING WITH AN EFFECTIVE DATE AS INDICATED ABOVE.

THE CORPORATION MAY RENEW THE RIGHT TO USE THIS NAME WITHIN TWO (2) MONTHS PRECEDING THE EXPIRATION OF SUCH RIGHT, FOR A PERIOD OF FIVE (5) YEARS, BY FILING AN APPLICATION WITH THE SECRETARY OF STATE.

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

FOR: ASSUMED NAME REGISTRATION

ON DATE: 03/31/97

FROM: IDT CORP. 294 STATE ST. RECEIVED:

FEES \$10.00

\$10.00

TOTAL PAYMENT RECEIVED:

\$20.00

RECEIPT NUMBER: 00002100387

Pely C Darnell

RILEY C. DARNELL SECRETARY OF STATE

900/1000

HACKENSACK, NJ 07601-0000

LANCE STEINHART

04/07/97 16:24 FAX 770 232 9208

#### 3315 3195

## FIGURETARY OF STATE

Farsturing to the provisions of Section 48-14-101(d) of the Tennessee Business Corporation Act or Section 48-54-101(d) of the Tennessee Nonprofit Corporation Act, the undersigned corporation hereby submits this application: SECRETARY OF STATE

1. The true name of the corporation is	TDT Corporation
2. The state or country of incorporation	n is Delaware
3. The corporation intends to transact b	ousiness in Tennessee under an assumed corporate name.
4. The assumed corporate name the cor	poration proposes to use is
Delaware IDT Corpo	pration
3/28/97	f the Tennessee Nonprofit Corporation Act.]  IDT Corporation
Signature Date	Name of Corporation
Colo Secu Signer's Capacity	Jaya Trasan
Signer's Capacity	Signature
	Joyce J. Mason
	Name (typed or printed)

**RDA 1720** 

### Lance J.M. Steinhart

Attorney At Law
500 Northpark Town Center - Suite 1112
1100 Abernathy Road
Atlanta, Georgia 30328

Also Admitted in New York and Maryland

Telephone: (770) 698-9200

Facsimile: (770) 698-9202

July 25, 1996

#### VIA FEDERAL EXPRESS

Mr. Scott Trout Tennessee Regulatory Authority 460 James Robertson Parkway Second Floor Nashville, TN 32743-0505

Re: IDT America Corp.

Public Service Commission ("PSC") Docket No. 96-0975

Dear Scott:

IDT America Corp. hereby requests that the above-referenced case be recommenced by the Tennessee Regulatory Authority ("TRA").

The Company further requests that the identifying docket number remain the same and that a credit be granted for the filing fee paid to the PSC.

Finally, since the above-referenced docket is an uncontested proceeding, the company further requests that the record before the PSC be adopted as the record before the TRA.

I have also enclosed an extra copy of this letter to be date stamped and returned to me in the enclosed, self addressed, postage prepaid envelope.

If you have any questions or if I may provide you with any additional information, please do not hesitate to contact me.

Respectfully submitted,

Lance J.M. Steinhart

Attorney for IDT America Corp.

Enclosures

cc: Ms. Joyce Mason

LJS/as