

Company ID: 128117
Ford Fiber Telecom, Inc.
107 Grass Street
Waveland, MS 39576

BEFORE THE TENNESSEE REGULATORY AUTHORITY
Nashville, TN December 15, 1998

IN RE: CASE NUMBER: 98-00162

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 or telecommunication operator service provider in Tennessee. The TRA considered this application at a Conference held on December 15, 1998 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:

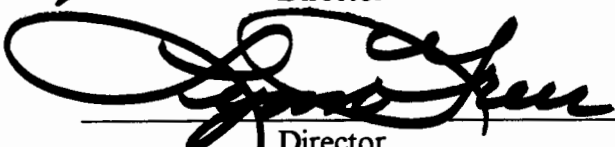
1. That the above-mentioned company is issued a Certificate of Convenience and Necessity as an operator service provider and/or reseller of telecommunications services for state-wide service in Tennessee as specified in its application on file with the Authority.
2. That said company shall comply with 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


Chairman


Director


Director

TENNESSEE REGULATORY AUTHORITY

Lynn Greer, Chairman
Sara Kyle, Director
Melvin Malone, Director

460 James Robertson Parkway
Nashville, Tennessee 37243-0505

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

REC'D TN
REGULATORY AUTH.
'98 FEB 27 PM 12 56
OFFICE OF THE
EXECUTIVE SECRETARY

Part 1: General Information

A. Name of Applicant Ford Fiber Telecom, Inc.
Address 107 Grass Street
City Waveland State MS Zip Code 39576 Phone No. (601) 463-1042

B. Owner, Partners, Or Corporate Officer

NAME	ADDRESS	CITY	STATE	ZIP CODE
Jeanne M. Normand President	107 Grass Street	Waveland	MS	39576

C. Name and telephone number of Tennessee contact person authorized to respond to Commission inquiries Monday through Friday.

Jeanne M. Normand (601) 463-1042 (800) 205-6688
Name Tennessee Phone No. Fax No.

D. List a toll-free telephone number that consumers can call to report service problems and/or request refunds or adjustments. (800) 205-6688

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

☒ Resell Interexchange long distance services
☐ Resell Local Exchange 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.
N/A Applicant is not an operator services provider.

G. List the state(s) you are authorized to operate in at this time. Texas.

98-00162

(To be filled out by PSC) _____

Company ID Number 128117

Date Approved _____

Evaluator _____

- H. List any states that you have been denied authority to provide service.
None.
- I. Areas in Tennessee to be served.
Entire state
- J. What type of customers will the company serve?
a. Business ✓
b. Residential ✓
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 you network? If yes, specify amount. N/A
- L. Are your prices for intrastate services plus any PIF equal to or less than the dominant carriers price for similar services? Yes___ No___ **N/A Competitive Services**
- M. 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. What is the applicant's 10XXX or 800 access code? N/A
- O. 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? USLD Communications
- Q. Will the applicant be utilizing the local telephone company's billing system or billing customers direct²? The applicant will be utilizing LEC billing.
- R. 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.
Services will be marketed directly by the company and through independent sales agents.
- S. Describe the procedures the applicant will use to switch a customer's preferred interexchange service. The Applicant will obtain a signed Letter of Agency in compliance with F.C.C. guidelines.

¹ Applicant is required to fill out an Informational Tariff form. Failure to fill out this form will cause the applicants request to be rejected.

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

- T. 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___ N/A
Applicant is a switchless reseller. Call blocking is controlled by the LEC.
- U. Applicant gives permission to the local telephone company to provide the Commission a periodic sample of the resellers 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___

Part II: Organization Structure

A. Type of Organization

___ Individual ☒ Corporation
___ Partnership ___ Other (Explain on separate sheet)

B. If partnership and/or Non-resident

- (1) Attach a copy of Articles of incorporation and current by-laws.
- (2) Attach a copy of Certificate of Authority issued by Tennessee Secretary of State showing corporation's authority to engage in business in Tennessee.

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)³, which includes a toll-free number customers can call for service problems and refunds.

N/A. All services are only available to presubscribed customers.

³ 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.
 - 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.

Ford Fiber Telecom, Inc. February 3, 1998
Company Name Date

 Samuel M. Harward President
Company Official Title

Subscribed and sworn
before me this 25th day
of February, 19 98



Notary Public

Mark P. Smith, Notary Public
Hancock County, Mississippi
My Commission Expires 6/30/

seal

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

ISSUANCE DATE: 03/06/1998
REQUEST NUMBER: 3465-2125

CHARTER/QUALIFICATION DATE: 03/02/1998
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0346679
JURISDICTION: MISSISSIPPI

TO:
FORD FIBER TELECOM
AT: J. NORMAND
107 GRASS STREET
WAVELAND, MS 39576

REQUESTED BY:
FORD FIBER TELECOM
AT: J. NORMAND
107 GRASS STREET
WAVELAND, MS 39576

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"FORD FIBER TELECOM, INC."

WAS INCORPORATED OR QUALIFIED TO DO BUSINESS IN THE STATE OF TENNESSEE ON THE
ABOVE DATE, AND THAT THE ATTACHED DOCUMENT(S) WAS/WERE FILED IN OFFICE ON THE
DATE(S) AS BELOW INDICATED:

REFERENCE NUMBER	DATE FILED	FILING TYPE	FILING ACTION
3461-1680	03/02/1998	QUAL-PROFIT	NAM DUR STK PRN OFC AGT INC MAL FYC

FOR: REQUEST FOR COPIES

FROM:
FORD FIBER TELECOM
107 GRASS ST
WAVELAND, MS 39576-0000



ON DATE: 03/06/98
RECEIVED: FEES
TOTAL PAYMENT RECEIVED: \$10.00 \$10.00 \$20.00
RECEIPT NUMBER: 00002262906
ACCOUNT NUMBER: 00279941

Riley C Darnell
RILEY C. DARNELL
SECRETARY OF STATE