

Company ID: 00128175

Express Connection Telephone Service
3207 Nolensville Road
Nashville, TN 37211

BEFORE THE TENNESSEE REGULATORY AUTHORITY

Nashville, TN

September 1, 1998

IN RE: CASE NUMBER: 98-00389

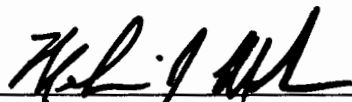
Application for Authority to Provide Operator Services and/or Resell Telecommunications Services in Tennessee Pursuant to Rule 1220-4-2-.57.

---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 August 4, 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.



Chairman



Director

ATTEST:


Executive Secretary
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]

VOUCHER NO. 777-728053
SEE 4775 SRC. 281.03
AMT. REC. 50.00
DEPOSIT DATE 6-3-98

SECTION A

Part 1: General Information

A. Name of Applicant EXPRESS CONNECTION TELEPHONE SERVICE
Address 3207 NOLENSVILLE RD. City NASHVILLE
State TN Zip Code 37211 Phone No. (615) 781-2646

B. Owner, Partners, or Corporate Officer

NAME	ADDRESS	CITY	STATE	ZIP CODE
ROBERTA SWAGER	3207 NOLENSVILLE RD	NASHVILLE	TN	37211

C. Name and telephone number of contact person authorized to respond to Authority inquiries regarding company operations Monday through Friday.
ROBERTA SWAGER (615) 781-2646 (615) 781-2646
Name Phone No. Fax No.

Name and telephone number of contact person authorized to respond to Authority inquiries regarding this filing Monday through Friday.
ROBERTA SWAGER (615) 781-2646 (615) 781-2646
Name 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. N/A, APPLYING FOR LOCAL SERVICE

E. Check the type of telecommunication services you plan to provide in Tennessee.
☐ Resell Interexchange long distance services
☐ Operator Services
☒ Resell local services
☐ Other (describe) _____

(To be filled out by TRA) 128175
Company ID Number _____
Date Approved _____
Evaluator _____

Mail the completed application and a check for \$50.00 to: Tennessee Regulatory Authority, P.O. Box 198907, Nashville, TN 37219-8907. Should you have any questions, call (615) 741-7489, ext. 163.

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

- 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.

PRINT ADS IN THRIFTY NICKEL, TRADER'S POST, & SIMILAR
PAPERS. FLYERS IN APARTMENT OFFICES, ETC. DIRECT
MAIL. NO TELEMARETERS WILL BE USED.

- S. Describe the procedures the applicant will use to switch a consumer's preferred interexchange service, if applicable.

- 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 ☐

- U. 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 ☐ I GIVE PERMISSION BUT WILL NOT BE RESELLING TOLL SERVICES.

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 Certification 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

If applicable, 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 consumers can call for service problems and refunds.

³It 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 Reseller or Operator Service Provider applicant, hereby, affirms the following:

- Has received, read, and understands the Tennessee Regulatory Authority's (TRA) Reseller Rules and Regulations, (Appendix III)
- Understands the penalties for non-compliance, and all associated fees to provide such service.
- Will comply with the TRA Reseller Rules and all other applicable Authority 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.

Express Connection 6/1/98
Company Name Date

Roberta Swager 6/1/98
Company Official Title
Roberta Swager

Subscribed and sworn
before me this 1st day
of June, 1998

Ann M. Vanhook
Notary Public

My Commission Expires NOV. 24, 2001

seal