

DOCKET NO. UM 1768

**Cover Sheet for Submission of
2016 Annual ETC Certification Reports**

Name of Eligible Telecommunications Carrier: Oregon-Idaho Utilities, Inc.

Filing date: June 17, 2016

Is this: Original submission? X
OR
Revised submission? _____

Person to contact for questions:

Name Justin Perez

Phone number (208) 461-7802

E-mail address justin.perez@oiutelecom.net

Documents included in this filing (please check applicable items):

____ CAF/ICC Support (47 CFR § 54.304)

X Rate Floor Data (47 CFR § 54.313(h)) – if separate from Form 481

____ Form 481 (High-cost per 47 CFR § 54.313, Low-income per 54.422)¹

____ Form 690 (Mobility Fund per 47 CFR § 54.1009)

____ Affidavit for High-Cost Support

Filing deadlines: The deadlines for filing items required by 47 CFR § 54 are the same as the deadlines for filing with the FCC. The notarized affidavit for high-cost support must be filed no later than the due date for the FCC Form 481. Based on current information, it appears that all items other than CAF/ICC support data are due by July 1, 2016. The CAF/ICC support data are due the same day as the ETC's interstate access tariff filing.

If revisions to an original submission are filed with the FCC or USAC, a copy of the revisions must be filed with the Oregon Commission no later than five business days following submission to the FCC or USAC.

¹ Lifeline-only ETCs must provide all information specified in 47 CFR § 54.422(b) even if the ETC does not submit this information to the FCC.

DOCKET NO. UM 1768

FILING INSTRUCTIONS

Please file submissions in Docket No. UM 1768. You do not need to include a cover letter if you use the cover sheet. Please fill in all relevant information.

Filings must be electronically submitted to the PUC Filing Center. You may e-mail documents to puc.filingcenter@state.or.us. Please note that the upload process is no longer an option for filing. See the PUC website for further instructions. If selected portions of documents, e.g., network plans, are to receive confidential treatment, those portions should not be filed electronically. You may electronically file redacted versions of documents containing confidential information, but then follow-up by sending full versions including confidential information printed on yellow paper.

After filing electronically, please send two hard copies of the filing package (cover sheet and filed information) to the PUC Filing Center. Be sure to include the original affidavit with the raised seal or notary's mark evident. Hard copies of confidential material should be filed in accordance with confidential designation requirements described in OAR 860-011-0080.

Regular delivery methods may be used to send all hard copy documents; overnight or express delivery is not necessary. Please send hard copy documents to the Filing Center via US mail using the following post office box address:

Public Utility Commission of Oregon
Attn: Filing Center
PO Box 1088
Salem, OR 97308-1088

If you send hard copy documents via means other than the US Postal Service, use the following address:

Public Utility Commission of Oregon
Attn: Filing Center
201 High Street SE, Suite 100
Salem, OR 97301

If you have any questions regarding the reporting requirements, please contact Kay Marinos at 503-378-6730 or send an e-mail to Kay.Marinos@state.or.us.

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE
1	Carrier Study Area Code	6 numeric digits	532390
2	Carrier Study Area Name	alpha characters	OREGON-IDAHO UTILITIES, INC.
3	Service Provider Identification Number	9 numeric digits	143002631
4	Residential Local Service Charge Effective Date	mm/dd/yy	07/01/16
5	Contact Name	alpha characters	Perez, Justin J
6	Contact Telephone Number (include area code)	9 numeric digits	208-461-7802
7	Sheet Number	numeric digit(s)	
8	Total Number of Sheets	numeric digit(s)	

Block 2- Residential Local Service Rates, Fees, and Line Counts

	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service
9	18.65		1.59		56	Adrian	Residential
10	18.65		1.59		2	Adrian	Lifeline
11	11.65		0.99		87	Jordan Valley/R1	Residential
12	11.65		0.99		1	Jordan Valley/R1	Lifeline
13	13.65		1.16		20	Jordan Valley/R1A	Residential
14	13.65		1.16		1	Jordan Valley/R1A	Lifeline
15	18.65		1.59		152	Jordan Valley/R1B	Residential
16	18.65		1.59		3	Jordan Valley/R1B	Lifeline
17	18.65		1.70	1.40	69	Ridgeview	Residential
18	18.65		1.70	1.40	3	Ridgeview	Lifeline
19	18.00		0.12		54	South Mountain	Residential