May 11, 2004 **Via Overnight Delivery** 

Ms. Lois Meerdink Oregon Public Utilities Commission Telecom Division 550 Capitol Street, N.E., Suite 215 Salem, Oregon 97301-2551

RE: Application for Certificate of Authority to Provide Telecommunications Service on Behalf of **Inmate Calling Solutions**, **LLC** 

Dear Ms. Meerdink:

Enclosed for filing are the original and two (2) copies of the application for Inmate Calling Solutions, LLC ("ICS) for a Certificate of Authority to provide telecommunications service in Oregon.

Please acknowledge receipt of this filing by returning, date-stamped, the extra copy of this cover letter in the stamped self-addressed envelope which is provided for that purpose.

Any questions regarding this filing may be directed to my attention at (407) 740-3004 or via email at <a href="mailto:rnorton@tminc.com">rnorton@tminc.com</a>. Thank you for your assistance in this matter.

Sincerely,

Robin Norton, Consultant to Inmate Calling Solutions, LLC

RN/bc

Enclosure

cc: Suzanne Haffner, ICS file: ICS - OR - Inmate

tms: ORi0400

PUBLIC UTILITY COMMISSION OF OREGON 550 CAPITOL STREET NE, STE. 215 PO BOX 2148 SALEM, OREGON 97308-2148 (503) 378-8959

> c. d.

# APPLICATION FOR CERTIFICATE OF AUTHORITY TO PROVIDE TELECOMMUNICATIONS SERVICE IN OREGON

INSTRUCTIONS: Complete every application section of this application. Attach additional documents and/or sheets to complete responses (if needed).. You will be notified when the Commission received your application, and again when it has been processed. Upon acceptance of this application, the Commission will publish notice pursuant to ORS 759.020(2). After submitting this application electronically, mail one copy with original signature and all attachments.

Classification for which application is made. Check one. Competitive Telecommunications Provider (local, long-distance, shared telecommunications service). □ Telecommunications Utility 1. Exact Legal Name of Applicant: Inmate Calling Solutions, LLC Applicant's Assumed Business Name(s) (if any) (e.g., dba, aka) Must be registered with the Corporation Division. Applicant's Type of Legal Entity (e.g., corporation, limited partnership) Limited Liability Company **Business Address** 5883 Rue Ferrari San Jose, California 95138-1857 Phone 408-362-4000 Fax 408-362-2798 Email www.inmatecallingsolutions.com 2. Name and Address of Person to be Contacted for Further Information Regarding This Application: Robin Norton, Consultant to Inmate Calling Solutions, LLC Technologies Management, Inc. P.O. Drawer 200 Winter Park, FL 32790-0200 Fax 407-740-0613 Phone 407-740-8575 Email rnorton @tminc.com 3. Name and Address of Person to be Contacted for Regulatory Information. (Commission will send requests for information to this person: Ms. Suzanne Haffner, Manager of Business Development Inmate Calling Solutions, LLC 1119 FM 67 Covington, Texas 76636 Email shaffner@inmatecallingsolutions.com Phone 254-874-5197 Fax 254-874-5470 4. Affiliated Interests: Are you now or have you ever been affiliated with any provider of telecommunications service that services Oregon? If so, who? When? Describe affiliation. Affiliated interest is defined in OAR 860-032-001. No 5. Previous Certificates of Authority: List each certificate of authority previously granted by the Oregon PUC to Applicant and to each affiliated entity, under a legal name, an assumed business name, or any other name. Include all certificates whether or not cancelled. For each certificate include: name of entity, docket number, and order number. Name of Entity **Docket Number** Order Number None a. b.

6.	Does	s applicant request authority to provide the following services?								
	a.	Shared telecommunications service (STS). STS includes resale of long-distance service to the STS provider's user group, but not to customers outside the user group. If yes, applicant must complete items 10 and 11.	□ Ye	es <b>E</b>	■ No					
	b.	Local exchange (intraexchange) switched service (i.e., local dial tone). If yes, applicant must complete item 10.	□ Ye	es e	No					
	C.	Local exchange (intraexchange) nonswitched, private line service (i.e., dedicated transmission service).	□ Ye	es <b>•</b>	■ No					
	d.	Interexchange, switched service (i.e., long-distance toll). If yes, applicant must complete item 10.	■ Ye	s [	□ No					
	e.	Interexchange, nonswitched, private line service (i.e., dedicated transmission service).	□ Ye	es <b>I</b>	■ No					
		Services Will Initially Be Provided following is required for public notice and information purposes and does not request authority	<u>-</u>							
	a. b.	Will Applicant resell finished services of other Oregon certified carriers? (Resell means resale of finished services, not unbundled network elements.) Will Applicant construct lines, loops, wires, fiber, or other transport facilities?	■ Ye		□ No ■ No					
	c.	Will Applicant have its own switching equipment?	□ Ye		I No					
	d.	Will Applicant purchase (lease) unbundled network elements from other Oregon certified carriers?	□ Ye		I No					
	e.	Will Applicant purchase or lease network components which are not unbundled network elements?	□ Ye	es •	■ No					
8.	Area	as for which Applicant seeks authority:								
		Alternative I: List every local exchange in which Applicant seeks to provide local exchange (intraexchange) Alternative II: List every incumbent local exchange carrier in whose exchanges Applicant seeks authority to provide local exchange (intraexchange) service.  Alternative III: If Applicant seeks authority to provide local exchange (intraexchange) service within every telephone exchange in Oregon, then specify "Statewide."								
Not applicable										
	b.	service. eeks authority to ephone exchange in								
	Sta	atewide								
9.	9. Describe special characteristics, limitations, or restrictions that will be part of Applicant's services.									
		nate Calling Solutions, LLC ("ICS") proposes to provide automated collect and prepaid calling confinement institutions throughout the state of Oregon.	service	es to in	mates					
10	. Op	erator Services:								
<ul> <li>a. Operator service includes, but is not limited to, billing or completion of third-party billing calls, person-to-person calls, collect calls, and credit card calls. See OAR 860-032-0001.</li> <li>Will Applicant directly offer operator services?</li> </ul>										
	b.	ORS 759.690(1)(d) defines "operator service provider" as a person who furnishes operator s contract with a call aggregator. ORS 759.690(1)(a) defines a call aggregator as a person who telephone for use by the public, i.e., transient use.  Will Applicant be an "operator service provider" as defined in ORS 759.690(1)(d)?		shed a	■ No					

#### 11. Shared Telecommunications Service:

Shared Telecommunications Service (ST) service is defined in OAR 860-032-0001. STS includes resale of long-distance service to the STS provider's user group, but not to customers outside the user group.

a. Provide the address of the building where shared service will be provided through privately owned customer premises equipment. If Applicant intends to serve a user group located in two or more buildings, include an electronic copy of a map clearly showing the locations to e served by the Applicant. The information on the map must be precise and legible and include street names and the city where the building(s) is(are) located.

Ν	Not applicable					
b.	An STS site or location consists of one building, or it consists of a complex of buildings or a campus on contiguous property. An STS provider may interconnect separate sites in order to aggregate toll traffic. An STS provider may not interconnect separate sites in order to provide local exchange service between those sites. If serving buildings at separate sites, will applicant interconnect the buildings in order to $\square$ Yes $\square$ No aggregate toll traffic?					
C.	Describe the user group or association at the STS location.					
No	Not applicable					

NOTE: Applicant must apply to PUC for another certificate of authority in order to add subsequent STS sites.

## Conditions of a certificate of authority:

As a condition of a certificate of authority, applicant must comply with all applicable Commission rules and state law, as well as conditions listed in the certificate.

For your convenience, following is a summary of some conditions from OAR 860-032-0001 et seq. (Division 32). Additional conditions may be specified in the certificate.

- a. Certificate holder shall provide only telecommunications services authorized by the certificate.
- b. Certificate holder shall, at a minimum, meet the standard level of service specified in OAR 860-032-012. The standard lever of service is 99 percent probability that a call will not be blocked during the certificate holder's busy hour of the day.
- c. Certificate holder's books and records shall be open to inspection by the Commission to the extent necessary to verify information required by the Commission's rules.
- d. Certificate holder shall maintain its books and records according to generally accepted accounting principles and the applicable rules of the Commission.
- e. Certificate holder shall pay all access charges and subsidies imposed pursuant to the Commission's rules.
- f. Certificate holder shall pay an annual fee to the Commission pursuant to the Commission's rules. This fee will be based on the certificate holder's annual gross retail intrastate revenues and will be no less than \$100 per calendar year. The certificate holder shall collect the fee by charging an equitable amount to each retail customer and describe the amount of the apportioned charge on each retail customer's bill, pursuant to the Commission's rules.
- g. The certificate holder shall pay a quarterly amount to the Oregon Universal Service Fund based on a Commission-approved surcharge percentage assessed on all retail telecommunications services sold in Oregon pursuant to ORS 759.425(4).
- h. Certificate holder shall respond in a timely manner to Commission inquiries.

Pursuant to Residential Service Protection statutes, Chapter 290, Oregon Laws 1987, and Dividion 22, certificate holder shall be responsible to ensure that the Residential Service Protection Fund surcharge is remitted to the Commission. This surcharge is assessed against each paying retail subscriber at a rate that is set annually by the Commission/

<ul> <li>Applicant understands that all services provided by Applicant must comply with all applicable Commiss rules and state law, and with conditions of the certificate (check box at left).</li> </ul>			

	Chief Operating Officer
Brendan Philbin	Title
	Date

PUBLIC UTILITY COMMISSION OF OREGON 550 CAPITOL STREET NE, STE. 215 PO BOX 2148 SALEM, OREGON 97308-2148 (503) 378-8959

## **APPLICATION FOR CERTIFICATE OF AUTHORITY** TO PROVIDE TELECOMMUNICATIONS SERVICE IN OREGON

INSTRUCTIONS: Complete every applicable section of this application. Attach additional documents and/or sheets to complete responses (if needed). You will be notified when the Commission receives your application, and again when it

has	s been processed. Upon accep	otance o	of this application, the	e Commiss	ion will publish notice pursuant to ORS  with original signature and all attachments.		
Cla	assification for which applica Competitive Telecommun Telecommunications Util	nication			shared telecommunications service).		
1.	Exact Legal Name of Applicant Inmate Calling Solutions,						
	Applicant's Assumed Business Must be registered with the Co			aka)			
	Applicant's Type of Legal Entity (e.g., corporation, limited partnership)  Limited Liability Company						
	Business Address 5883 Rue Ferrari San Jose CA 95138-1857						
	Phone <b>408-362-4000</b>	Fax	408-362-2798	Email	www.inmatecalling solutions.com		
2.	Name and Address of Person	o be Co	ontacted for Further	Information	Regarding This Application:		
Robin Norton, Consultant to Inmate Calling Solutuions, LLC P.O. Drawer 200 Winter Park FL 32790-200							
	Phone <b>407-740-8575</b>	Fax	407-740-0613	Email	rnorton@tminc.com		
	Name and Address of Person information to this person):	o be Co	ontacted for Regulate	ory Informa	tion. (Commission will send requests for		
	Suzanne Haffner, Manage 1119 FM 67 Covington TX 76636	r of Bu	siness Developmer	nt			
	Phone <b>254-874-5197</b>	Fax	254-874-5470	Email	shaffner@inmate calling solutions.com		
	Affiliated Interests: Are you now or have you ever so, who? When? Describe aff				communications service that serves Oregon? If OAR 860-032-0001.		

,	_			
No				

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# 5. Previous Certificates of Authority:

List each certificate of authority previously granted by the Oregon PUC to Applicant and to each affiliated entity, under a legal name, an assumed business name, or any other name. Include all certificates whether or not canceled. For each certificate include: name of entity, docket number, and order number.

		Name of Entity	Docket Number	Order Number					
ä	а.	None							
	0.								
	c. d.								
•	J.								
	AUTHORITY REQUESTED								
3. I	Do	es applicant request authority to provide the following services?							
í	а.	Shared telecommunications service (STS). STS includes resale of long-dist the STS provider's user group, but not to customers outside the user group. applicant must complete items 10 and 11.		☐ Yes 🗹 No					
I	0.	Local exchange (intraexchange) switched service (i.e., local dial tone). If ye must complete item 10.	s, applicant	☐ Yes 🗹 No					
(		Local exchange (intraexchange) nonswitched, private line service (i.e., dedictransmission service).	cated	☐ Yes 🗹 No					
(	d.	Interexchange, switched service (i.e., long-distance toll). If yes, applicant m item 10.	ust complete	✓ Yes  ☐ No					
(	Э.	Interexchange, nonswitched, private line service (i.e., dedicated transmissio	n service).	☐ Yes  ☑ No					
		w Services Will Initially Be Provided e following is required for public notice and information purposes and does n	oot request authori	ity.					
í	а.	Will Applicant resell finished services of other Oregon certified carriers? (Reresale of finished services, not unbundled network elements.)	esell means	✓ Yes  ☐ No					
ı	b. Will applicant construct lines, loops, wires, fiber, or other transport facilities?								
(	С.	Will Applicant have its own switching equipment?		☐ Yes  ☑ No					
(	d.	Will Applicant purchase (lease) unbundled network elements from other Ore carriers?	gon certified	☐ Yes 🗹 No					
(	Э.	Will Applicant purchase or lease network components which are not unbund elements?	led network	☐ Yes 🗹 No					
3. /	Ar	eas for which Applicant seeks authority:							
á	a. Intraexchange Authority:								
	Alternative I: List every local exchange in which Applicant seeks to provide local exchange (intraexchange) service								
Alternative II: List every incumbent local exchange carrier in whose exchanges Applicant seeks authority to prolocal exchange (intraexchange) service.  Alternative III: If Applicant seeks authority to provide local exchange (intraexchange) service within every telep exchange in Oregon, then specify "Statewide."  Not applicable									
						o.	Interexchange Authority:		
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		Alternative III: If Applicant seeks authority to provide interexchange service Oregon, then specify "Statewide."	in every telephone	e exchange in					
	Statewide								

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## 9. Describe special characteristics, limitations, or restrictions that will be part of Applicant's services: Inmate Calling Solutions, LLC ("ICS") proposes to provide automated collect and prepaid calling services to inmates of confinement institutions througout the state of Orgeon. 10. Operator Services: a. Operator service includes, but is not limited to, billing or completion of third-party billing calls, person-to-person calls, collect calls, and credit card calls. See OAR 860-032-0001. Will Applicant directly offer operator services? ✓ Yes No b. ORS 759.690(1)(d) defines "operator service provider" as a person who furnishes operator service under contract with a call aggregator. ORS 759.690(1)(a) defines a call aggregator as a person who furnishes a telephone for use by the public, i.e., transient use. Will Applicant be an "operator service provider" as defined in ORS 759.690(1)(d)? ☐ Yes 🗸 No 11. Shared Telecommunications Service: Shared Telecommunications Service (STS) service is defined in OAR 860-032-0001. STS includes resale of long-distance service to the STS provider's user group, but not to customers outside the user group. a. Provide the address of the building where shared service will be provided through privately owned customer premises equipment. If Applicant intends to serve a user group located in two or more buildings, include an electronic copy of a map clearly showing the locations to be served by the Applicant. The information on the map must be precise and legible and include street names and the city where the building(s) is(are) located. Not applicable b. An STS site or location consists of one building, or it consists of a complex of buildings or a campus on contiguous property. An STS provider may interconnect separate sites in order to aggregate toll traffic. An STS provider may not interconnect separate sites in order to provide local exchange service between those sites. If serving buildings at separate sites, will applicant interconnect the buildings in order to ☐ Yes ☐ No aggregate toll traffic? c. Describe the user group or association at the STS location. Not applicable NOTE: Applicant must apply to PUC for another certificate of authority in order to add subsequent STS sites.

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Pursuant to Residential Service Protection statutes, Chapter 290, Oregon Laws 1987, and Dividion 22, certificate holder shall be responsible to ensure that the Residential Service Protection Fund surcharge is remitted to the Commission. This surcharge is assessed against each paying retail subscriber at a rate that is set annually by the Commission.

Applicant understands that all services provided by Applicant must comply with all applicable Commission rules and state law, and with conditions of the certificate (check box at left).

Signature of Person Authorized to Represent Applicant	Title Chief Operating Officer	
Typewritten Name Brendan Philbin	<b>Date</b> May 10, 2004	

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