

DOCKET NO. UM 1310

**Required Cover Sheet for Submission of
2007 Annual ETC Recertification Reports**

Filing Deadline: Monday, July 16, 2007

Name of Eligible Telecommunications Carrier: Helix Telephone Company

Filing date: 07/12/07

Is this: Original submission? _____

OR

Revised submission? X If revised, please identify which reports
are being revised Report #6

Person to contact for questions:

Name Jim Smith

Phone number 541-457-2385

E-mail address htc@helixtel.com

Filing instructions: Please file reports under Docket No. UM 1310. File reports electronically via the PUC Filing Center; see the PUC website for instructions. Also send one original and 2 hard copies to the PUC Filing Center. If selected portions of reports, e.g., network improvement plans, are to receive confidential treatment, those portions should not be filed electronically. 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. Send documents to the Filing Center using one of the two following addresses, depending on the delivery carrier used:

For US mail: Public Utility Commission of Oregon
Attn: Filing Center
PO Box 2148
Salem, OR 97308-2148

For other carriers: Public Utility Commission of Oregon
Attn: Filing Center
550 Capitol St. NE #215
Salem, OR 97308-2148

If you have any questions on these reports, please call Kay Marinos at 503-378-6730, or Celeste Hari at 503-378-6628.

2007 Annual Recertification Reports for ETCs in Oregon

Docket No. UM 1310

Report Formats to Satisfy Requirements of Order No. 06-292 for 2007

Report #1 Supported Services Offerings

- 1.1. Basic Local Usage Service Offerings – **All ETCs**
- 1.2. Comparable Local Usage Plan – **CETCs only**
- 1.3. Supported Services Not Provided – **CETCs only**
- 1.4. Equal Access Acknowledgement – **CETCs only**

Report #2 Unfulfilled Service Requests

- 2.1. Unfulfilled Service Requests/Held Orders – **All ETCs**
- 2.2. Service Request Processing – **CETCs only**

Report #3 Evidence of Advertising for Basic Supported Services - All ETCs

Report #4 Low-income Services – All ETCs

- 4.1. Number of Lifeline Customers
- 4.2. Advertising of Low-income Program Service Offerings

Report #5 Outage Report – All ETCs

Report #6 Trouble Report – All ETCs

Report #7 Network Improvement Plan – CETCs only

Report #8 Special Commitments/Requirements – CETCs only

Report #9 Certifications – All ETCs

- 9.1. IAS or ICLS Certification Copy – **All ETCs Receiving IAS or ICLS**
- 9.2. Certification of Use of Universal Service Funds – **All ETCs Receiving Traditional High-Cost Support (HCL, LSS)**
- 9.3. Certification of Emergency Functionality and Compliance with Service Quality/Consumer Protection Measures – **All ETCs**

Report #1 – Supported Services Offerings

1.1. Basic Local Usage Service Offerings – All ETCs

Choose **either A. or B.** below, as applicable:

A. Basic local usage service offerings are filed under tariff with the Oregon PUC. The specific tariff references (with *company name, tariff number, section and page numbers*) for the basic local usage offerings and corresponding rates are:

1. residence:

2. business:

B. Basic local usage service offerings are **not** filed under tariff with the Oregon PUC. Submit the following information for each basic service offering that includes local usage allowances (unlimited or limited): 1) plan’s name, 2) advertised public description, 3) number of local minutes included, 4) calling area included, and 5) rates and charges. Include basic offerings for both residence and business services.

1.2. Comparable Local Usage Plan – CETCs only

The carrier certifies that it offers at least one basic local usage plan that is comparable to those offered by the ILECs in its designated service area: yes no

Identify which of the plans in 1.1.B above are “comparable” to the ILEC local usage offerings, and explain the basis for the comparability. _____

1.3. Supported Services Not Provided – CETCs only

Identify any supported services that were not available at designation, but were to be provided as a condition of ETC designation (e.g., toll restriction for qualifying low-income consumers, E911): _____

Are these services provided currently? yes no

If no, explain why not: _____

1.4. Equal Access Acknowledgement – CETCs only

The carrier acknowledges that it may be required to provide equal access if it is the only remaining ETC in an area: yes no

Helix Telephone Company
200 Concord
PO Box 326
Helix, Or 97835
541-457-2385

Office hours: 8am to 12pm Monday, Wednesday, Friday
8am to 5pm Tuesday and Thursday

PHONE SERVICE

Residence Basic	\$22.10 plus tax & OUS Surcharge
Zone 1 Basic (over 2 mi from CO)	\$24.10 plus tax & Surcharge
Zone 2 Basic (over 6 mi from CO)	\$26.10 plus tax & Surcharge
Business Basic	\$27.60 plus tax & Surcharge
Zone 1 Business Basic	\$29.60 plus tax & Surcharge
Zone 2 Business Basic	\$31.60 plus tax & Surcharge

CALLING FEATURES

Caller ID	\$5.00
Auto Callback	\$1.00
Calling Number Delivery Block	\$1.00
Last Number Re-Dial	\$1.00
Call Forward	\$1.00
Call Waiting	\$1.00
Distinctive Ring	\$1.50

INTERNET SERVICE

Internet Service - DialUp	\$19.00		
Residential DSL	256 speed	\$26.00	dial up account 1 mailbox
	512 speed	\$46.00	\$5.00 each additional
	1024 speed	\$66.00	
Business DSL	256 speed	\$46.00	dial up account 1 mailbox
	512 speed	\$66.00	
	1024 speed	\$86.00	
Modems		\$70.00	
Modems (paid for at \$10/mo)		\$80.00	
Phone filter for DSL (desk)		\$2.25	
Phone filter for DSL (wall)		\$12.16	

Report #2 – Unfulfilled Service Requests

2.1. Unfulfilled Service Requests/Held Orders – All ETCs

Choose **either A. or B.** below, as applicable:

- A. ___ Service quality reports for “primary held orders over 30 days” were filed with the Oregon PUC for calendar year 2006. No additional submission is required for recertification purposes.
- B. X Service quality reports for “primary held orders over 30 days” were **not** filed with the Oregon PUC for calendar year 2006. In this case, choose **one** of the following alternatives for reporting:
1. X The number of customer requests for supported services that were not fulfilled during calendar year 2006: 0 .
If greater than zero, include an attachment noting for each such request, the location (address) of the request and a description of attempts to provide service.
 2. X The number of “primary held orders over 30 days” (as defined in Section 860-034-0390 of the Oregon Commission rules) for calendar year 2006: 0 .
If greater than zero, include attachment noting for each such held order, the reason the order was held and the original commitment date.

2.2. Service Request Processing - CETCs only

Submit a description of how the carrier ensures that every request for service that cannot be immediately fulfilled is recorded and processed under the 6-step process set forth in 47 CFR Section 54.202(a)(1)(i).

**Report #3 – Evidence of Advertising for Basic Supported Services
(excluding low-income/lifeline) – All ETCs**

Describe how basic supported services were advertised during calendar year 2006 throughout the designated service area. List the types of media used, advertising frequencies and geographic coverage. Attach examples of actual advertisements, noting dates, specific distribution methods, and target geographical populations, sufficient to demonstrate that basic supported services and rates were advertised **throughout** the designated service area in 2006.

Advertisement is displayed in Post Office. Copy attached

Advertisement

HELIX TELEPHONE COMPANY

Helix Telephone Company is a quality telecommunications services provider who provides basic and enhanced services at reasonable rates within its service territory. Basic services are offered at the following rates:

<u>Services Offered</u>	<u>Monthly Charge</u>	
	<u>Residence</u>	<u>Business</u>
Single-Party	\$13.80	\$16.60
Federal Subscriber Line Charge single line	\$6.50	
Federal Subscriber Line Charge Business multi-line		\$9.20
Directory Assistance	No additional charge by Helix Telephone Company	
Touch Tone Service	\$1.00	\$1.00
Toll Blocking	Available at no charge for low-income customers that qualify.	
Emergency 911 Services	Surcharges for 911 services are assessed according to government assessments.	

Low-income individuals eligible for Lifeline and Link-Up telephone assistance programs may be eligible for discounts from these basic local service charges through state specified telephone assistance plans.

Basic services are offered to all consumers in the Helix Telephone Company service territories at the rates, terms and conditions specified in the Company's tariffs. If you have any questions regarding the Company's services, please call us at 541-457-2385, or visit our business office at 200 Concord, Helix, Oregon for further information regarding our services.

Report #4 – Low-income Services – All ETCs

4.1. Number of Lifeline Customers – All ETCs

The total number of customers receiving Lifeline discounts during the month of December 2006 in the designated service area: 3 .

CETCs only - also list counts by ILEC service area as follows:

<u>ILEC Svc Area</u>	<u>No. of Lifeline customers</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

4.2. Advertising of Low-Income Program Service Offerings – All ETCs

Submit copies of all advertisements (for all media) for Lifeline, LinkUp, and OTAP service offerings that were run during calendar year 2006, noting media (newspaper name, radio station, bill inserts, internet postings, etc.), run/distribution dates, and geographic coverage area.

Billing inserts for all customers in exchange 457 & 983:

Financial assistance for telephone services is available to qualified low-income persons through the Oregon Telephone Assistance Program (OTAP) operated by the Public Utility Commission. For information, contact OTAP at 1-800-848-4442.

The Oregon Telephone Assistance Program (OTAP) helps you with your phone bill. The maximum reduction from your phone bill is currently \$13.50. You may get the basic rate of your phone bill reduced if you are getting one of the benefits listed below:

- Food Stamps
- Supplemental Security Income (SSI)
- Certain types of Medical Assistance from the Department of Human Services (DHS). Your worker can tell you what Medical Benefit you receive.
- Temporary Assistance to Needy Families (TANF)

OTAP benefits start on the date the Public Utility Commission (PUC) receives your submitted application. The person receiving the benefits must have their name on the phone bill. It will take about 30-90 days from that date for the discount to show on the phone bill. **Your OTAP benefits will stop if you no longer get one of the above benefits.** Please let PUC know whenever you change your address or phone number

Report #5 – Outage Report – All ETCs

Choose **either A. or B.** below, as applicable:

A. Carrier was required to report service outages (as defined in Oregon PUC Rules at Sections 860-034-0390(9) for small telecom utilities, 860-023-0055(9) for large telecom utilities, and 860-032-0012(9) for competitive telecom providers) to the Oregon PUC during year 2006. No additional submission is required for recertification purposes.

B. Carrier was *not* required to report service outages (as defined in Oregon PUC Rules at Sections 860-034-0390(9) for small telecom utilities, 860-023-0055(9) for large telecom utilities, and 860-032-0012(9) for competitive telecom providers) to the Oregon PUC during year 2006. Select #1 (wireline carriers) or #2 (wireless carriers) below.

1. The number of service outages, as defined in Oregon PUC rules, that occurred during calendar year 2006 was 0.

If the number was greater than zero, attach a report that lists for each such outage the following: the date and time of onset, a brief description of the outage and its resolution, the particular services affected, the geographic areas affected, steps taken to prevent a similar future occurrence, and the number of customers affected.

2. The number of service outages, as defined in FCC rules at 47 CFR Section 54.209(a)(2), that occurred during calendar year 2006 was _____.

If the number was greater than zero, attach a report that lists for each such outage the following: the date and time of onset, a brief description of the outage and its resolution, the particular services affected, the geographic areas affected, steps taken to prevent a similar future occurrence, and the number of customers affected.

Report #6 – Trouble Report – All ETCs

Choose **either A. or B.** below, as appropriate:

A. ____ Trouble reports were filed with the Oregon PUC for calendar year 2006 per Oregon PUC service quality rules. No additional submission is required for recertification purposes.

B. X Trouble reports were **not** filed with the Oregon PUC during calendar year 2006. In this case, choose **one** of the following alternatives for reporting:

1. N/A The number of customer trouble reports received per 100 wireless handsets for supported services during calendar year 2006, for each company switch.

<u>Trouble Type</u>	<u>Switch A (location)</u>	<u>Switch B (location)</u>
No service	_____	_____
Network busy	_____	_____
Interruption of service	_____	_____
Poor reception	_____	_____

2. X The number of customer trouble reports, as defined in Section 860-034-0390 (5) of the Oregon PUC rules, received during calendar year 2006: .23 per 100 working access lines.

* Refer to following Trouble Report

Report #7 – Network Improvement Plan – CETCs Only

The following detailed information must be included in each network improvement plan. Only CETCs must file these plans for recertification purposes. CETCs that receive *only* low-income program support (no high-cost or access-related support), do not have to file network improvement plans. CETCs are strongly encouraged to use the format laid out in the attached Excel worksheets to provide information required in the outline below (taken from the UM 1217 order), rather than use some other format developed by the CETC.

- 7.1. Demonstration of use of support funds (other than low-income funds) received during 2006, including:
 - 7.3.1.1. The amount of support funds, by type, received during the year.
 - 7.3.1.2. Year-end counts of eligible lines/handsets in service for each ILEC service area as they were reported to USAC for the past December.
 - 7.3.1.2. Identification of each project for which the support was used, the actual support expenditures (by amount and type) for each project, and status of project (completed or still in progress).
 - 7.3.1.3. The resulting benefits to consumers (qualitative and quantitative) from each project and updates to coverage and signal strength maps.
 - 7.3.1.4. Explanation of how and why actual spending of support funds differed from spending proposed in the previous network improvement plan.
- 7.3.2. Updates to network improvement plan for the current calendar year and the following year:
 - 7.3.2.1. Forecast of support amount, by type (LSS, HCL, ICLS, IAS), that the applicant expects to receive during each of the next 2 years, as well as an explanation of how the forecast was derived.
 - 7.3.2.2. Detailed information for each project that will use support funds:
 - 7.3.2.2.1. Description and purpose of the project, its physical location and the ILEC serving that area.
 - 7.3.2.2.2. The start date and completion data (by quarter).
 - 7.3.2.2.3. Amount of support money allocated to the project, in total and broken down by investment and expense types.
 - 7.3.2.2.4. The amount of company's own funds that will be used for each supported project.
 - 7.3.2.2.5. Brief explanation of why the carrier would not make these improvements without the availability of support funding.
 - 7.3.2.2.6. Quantification of resulting service improvements by type (increased coverage, signal strength, capacity, etc.), population benefited, and geographic area benefited (shown on map).

Report #8 – Special Commitments/Requirements – CETCs only

Did the Oregon PUC impose any special commitments or requirements at initial designation or during the previous annual recertification process? yes ____ no ____.

If yes, identify the commitments or requirements and explain if, and how, they have been met.

Report #9 – Certifications - All ETCs

9.1. IAS or ICLS Certification Copy – All ETCs Receiving IAS and/or ICLS

All ETCs receiving interstate access-related support (IAS or ICLS) must submit a copy of the certification for the use of IAS or ICLS support that was sent to USAC and the FCC in June 2007.

9.2. Certification of Use of Universal Service Funds – All ETCs receiving HCL and/or LSS (Rural ILECs and CETCs Designated in Rural ILEC Areas)

To continue receiving traditional high cost support (HCL, LSS), ETCs must submit a notarized affidavit signed by a responsible company official certifying that the carrier will use the high cost support funds only for the intended purposes. Use of the sample affidavit form displayed on the following page is recommended.

9.3. Certification of Emergency Functionality and Compliance with Service Quality and Consumer Protection Measures – All ETCs

Each ETC must submit a notarized affidavit signed by a responsible company official certifying that the carrier: 1) is able to remain functional in an emergency, and 2) is complying with all service quality and consumer protection measures in either the applicable Oregon Commission rules (for wireline carriers), the CTIA Consumer Code (for wireless carriers), or some other specific set of standards. All ETCs must submit this affidavit. A copy of an acceptable affidavit form follows the affidavit for high cost support.

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, James A. Smith, being of lawful age and duly sworn, on my oath state that I am the President (an officer) of Public Telephone Company ("Company"), and that I am authorized to execute this Affidavit on behalf of the Company, and the facts set forth in this Affidavit are true to the best of my knowledge, information and belief.

Pursuant to the rules of the Federal Communications Commission, 47 C.F.R. § 54.114, there must be annual certification that funds received under the federal Universal Service Fund program will be used only for the provision, maintenance and upgrading of facilities and services for which the support is intended. The Company hereby certifies to the Public Utility Commission of Oregon that pursuant to 47 C.F.R. § 54.7, and for purposes of the certification required under 47 C.F.R. § 54.114, the company will use all federal high-cost support provided to it only for the provision, maintenance, and upgrading of facilities and services for which the support is intended, consistent with the principles of universal service set forth in 47 U.S.C. 254. This includes, but is not limited to, trying to meet the goal of the provision of services that are properly supported by the High-cost funds at rates that are reasonably comparable to rates charged for similar services in urban areas.

DATED this 22 day of July, 2007.

Public Telephone Company (Company)

By James A. Smith (Name)

In President (Title)

MY SUBSCRIBER AND SWORN to before me this 12 day of July, 2007.

Connie R. Berger
Notary Public in and for the State of Oregon

My Commission Expires: 12/31/2010



AFFIDAVIT CERTIFYING EMERGENCY FUNCTIONALITY AND COMPLIANCE
WITH SERVICE QUALITY AND CONSUMER PROTECTION MEASURES

I, James A. Smith, being of lawful age and duly sworn, on my oath, state that I am the President (an officer) of Relix Telephone Company ("Company") and that I am authorized to execute this Affidavit on behalf of the Company, and the facts set forth in this Affidavit are true to the best of my knowledge, information, and belief.

The Company hereby certifies to the Public Utility Commission of Oregon, pursuant to the requirements of Commission Order No. 06-292, that it:

- 1) is able to remain functional in emergencies, and,
- 2) complies with service quality and consumer protection measures in (check one):
 - applicable Oregon Commission rules, or
 - the CTA Consumer Code for Wireless Carriers, or
 - other (describe and explain how compliance with requirements of Order No. 06-292) _____

DATED this 12th day of July, 2007.

Relix Telephone Company (Company)

James A. Smith (Name)

as President (Title)

SUBSCRIBED AND SWORN to before me this 12th day of July, 2007.

Carole R. Roper
Notary Public in and for the State of Oregon

My Commission Expires 12/31/2010

